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ABSTRACT

These quarterly reports for 1996 of the Alaska Department of Community and Regional Affairs provides information on the activities of the Alaska Head Start State Collaboration Project and other Head Start activities, as well as legal and policy changes affecting the education of young children in Alaska. The spring 1996 issue includes articles on family/school/community partnerships, parent involvement in Head Start, the meeting of the Alaska Head Start Association, the Danforth Foundation award to develop innovative ways of improving education and the delivery of human services, and reorganization of the Alaska Children's Trust. The summer 1996 issue focuses on mental health needs of young children and families. The fall 1996 issue focuses on the state budgetary process and the 1996 fiscal year budget, and the governor's State of the Child Address. The winter 1996 issue includes articles on building communities for children and families, advocating for children, and the governor's Conference on Youth and Justice. Regular features in each issue are a calendar of events; "Children's Cabinet News," containing updates on government- and privately-funded programs; a status report providing statistical information regarding child care and other issues influencing young children; and a summary of activities of the Collaboration Project and of Head Start. (KB)

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Alaska Head Start State Collaboration Project

Alaska Department of Community and Regional Affairs • Quarterly Report • Spring 1996

Alaska's Children

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Family/School/Community Partnerships

Putting Parents And Families In Their Place

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Marilyn Webb
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Perhaps one of the most boring ways to begin any conversation or written discussion is to say something like "... all of the research on this topic shows that what we are about to tell you is true." Unfortunately, it is almost impossible to begin a discussion about the importance of involving families in their children's education without talking about the two decades of research that supports this idea.

Quite simply, children are more successful in school when their parents and families are actively involved in their education. Research has consistently documented the importance of family involvement at all grade levels. The research studies vary widely in approach, methodology and subject matter. Some studies looked at high-achieving students to see if their parents were more involved; some looked at programs with standard structures and content but with variations in levels of parent involvement; some were confined to single school districts or programs over short periods of time; others were massive analyses of nationwide surveys. At least three recent publications have provided a synthesis of the available research. These sources are listed at the end of this article.

Who Benefits from Family Involvement in Education?

What is clear from all of this research is that the benefits of family involvement go much further that just improving student success in school. Benefits can also be measured for schools, teachers, administrators, communities, and for parents and families.

When parents and families are involved in education, students have:

- higher grades and test scores
- better long-term academic achievement
- better attitudes toward school, homework and teachers
- improved communication with teachers, parents, families
- higher self-esteem and improved self-concepts
- better classroom behavior
- more consistent attendance at school.

When parents and families are involved in education, teachers report:

- an improved image with parents
- greater appreciation and support from parents and their community

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The Alaska Head Start State Collaboration Project is funded by a grant from the U.S. Department of Health and Human Services.
For more information, contact the Alaska Head Start Office at (907) 465-4860.
Project Director–Marilyn Webb; Newsletter Editor–Dorothy Douglas

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PARENT INVOLVEMENT, *continued*

- improved attitudes and higher job morale
- increased sensitivity to their students and their families
- more effective teaching, teachers are more likely to experiment and develop approaches that are more student oriented
- more job satisfaction
- reduced feeling of isolation from their peers, community
- parents rate teachers who are leaders in family-involvement practices higher in overall teaching ability and interpersonal skills.

When parents and families are involved in education, schools have:

- increased political support for school funding and specialized programs
- increased resources in their school environments
- parents with better attitudes toward their school and the staff
- parents who help gather community support for school needs
- higher levels of achievement from their school population
- a cost-effective program to provide one-on-one support for students both at home and in the classroom.

When parents and families are involved in education, they can:

- better appreciate the teaching profession and have better attitudes toward their school and the staff
- improve their parenting skills
- reduce feelings of isolation and become more active in community affairs
- increase their self-esteem and self-concepts
- improve their skills in decision-making, communication
- improve their own education and literacy levels
- provide more opportunities for their children to be successful regardless of family issues such as income, lack of formal education, single parent homes.

The benefits that students, families, teachers and schools will realize is dependent on the types and level of parent/family involvement within a school. Schools with higher levels of achievement have considerably greater parent/family involvement.

Defining Parent Involvement

What do we mean by "parent" and "involvement?" Today, the person(s) who parent a child may be a teenager, a single father, a recent immigrant, a grandmother, a foster parent, an aunt or a great aunt, a step-parent; or there may be two birth parents in the home. Parenting activities may be shared by any combination of adults and siblings. Because of the diversity of today's home environments, using the term "family" rather than "parent" helps to expand our definition of who parents a child.

Family Involvement in education begins at home and it begins at birth.

In order to take advantage of all the benefits of family involvement in education, it is also necessary to expand our definition of involvement, from thinking of families as more than volunteers or audiences to thinking of them as partners with teachers, schools and communities. Additionally, when partnerships are formed between families and schools there is a shared responsibility for educating children between families, schools and communities.

Home/School Partnerships

Family involvement in education begins at home and it begins at birth. Families are a child's first and most important teacher. They affect almost every aspect of a child's life: self-esteem, health, attitudes, values, behavior, readiness for school and success in life. Families provide the primary environment in which a child will acquire language, small and large motor skills, ability to relate and interact with other children and adults, early education skills in reading, writing, critical thinking, etc. Families will have acquired, mostly on their own, the training, education and experience they need to support their child's early learning activities.

By the time a child reaches the public school system, they will have already had a wide variety of educational experiences and family's will have been directly involved in those experiences. Most children will have been enrolled in informal play groups, child care, preschool, comprehensive early childhood programs such as Head Start and specialized programs for children with disabilities. Many of these programs have, as a condition of enrollment, some type of parent involvement requirement and families have had direct decision making responsibilities about the type of program their child will attend, who will provide care, and how the family will participate in these experiences.

When a child reaches public school, the family's role in education may change significantly, depending on the level of family involvement encouraged by the school. If a school encourages limited family involvement, they may believe a family's *only* obligation is to make sure children are well rested, healthy, have nutritious meals and snacks, arrive at school promptly and dressed appropriately, and to make sure homework is completed on time. A limited effort on the part of the school means they will get limited returns from families and a major opportunity will have been lost.

The home/school partnership carries the most potential for increasing student success and increasing the number of families involved in their children's education. Home is where families are most willing and able to support their children. The majority of children today live in homes where their parents are employed outside the home. Parents are unable to spend time during the day on school activities. Non-work hours, especially for single parents, are filled with housekeeping duties, supporting after-school activities for their children such as sports and clubs, and a list of other obligations. Parents often report that they feel so overwhelmed by the demands on their time that they simply do not have the energy to attend evening or weekend school meetings, volunteer activities or other school functions. One research survey reported that:

- only 4% of elementary school parents are active at school 25 days or more

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during the school year.

- 70% of parents have never volunteered at the school, either in the classroom, on field trips or for fundraisers or other school activities,
- by contrast, over 85% of the parents surveyed spent a quarter hour or more helping children at home when requested by the teacher and were willing to do more if asked,
- 90% of elementary and middle school parents and 80% of high school parents believe the school should tell them how to help at home,
- most parents felt that they should be helping their children at home but were unsure they were doing the right things and were reluctant to get involved.

Not only do parents want more help supporting their children's learning activities at home, they want more help in solving social, academic and personal problems within their family, especially as their children move through challenging adolescent years.

When schools form partnerships with families, they communicate with all families about school programs, curriculum, learning activities the students will be engaged in, the skills students will be expected to acquire, and the progress students are making. Schools support learning activities at home by providing information to parents on how to monitor, discuss and help with homework. Schools will also assist parents with the knowledge and skills they will need to understand their child at each grade and developmental level.

Currently families in pre- and elementary school receive more help from teachers and schools on how to become involved at home. There is a dramatic decrease in family involvement with each passing grade level of school. This is especially severe in middle and high school even though middle and high school years are the most challenging for students, families and schools. Families and schools typically work alone to solve social, academic and personal problems that increase in adolescent years. Parents of older students need more self-confidence, negotiation skills, information skills and intervention techniques than do families of younger students, but they get less assistance from schools.

The home/school partnership provides a very strong foundation for family involvement, and some people feel the most important one. When families become engaged in education at home, they often gain the confidence, enthusiasm and desire to extend their support into the school, despite constraints on their free time.

Family/School Partnerships

The years of research on family involvement also stress the importance of family involvement at the school. Family members have traditionally been invited into schools for sports events, plays and musicals, open houses and celebrations such as graduation ceremonies and holiday parties. In these instances, parents and families serve as an audience for school activities and in many cases provide the foods, decorations and monitoring these events require. Parents in most, but not all schools, are also invited to meet with their child's teacher for parent-teacher conferences. Conferences are usually designed to give parents a report on their child's school progress, rather than an opportunity to participate with the school in planning their child's educational experience. For the majority of schools today, this is the extent of planned parent involvement. When school contact is limited to these types of activities, parents remain on the periphery of the child's school experience, an observer rather than an active participant and family involvement at school remains at a minimal level.

Perhaps the most controversial aspect of family involvement in education is that families should be involved as decisionmakers.

Celebrating with children and being an enthusiastic audience for children's accomplishments is very important but is only a piece of the support that parents can provide. To move from a minimal level of family involvement at school to strong partnerships, families need to be actively involved in the classroom, in school and district-wide activities and as decisionmakers.

Many family members report they do not volunteer to help at school because they do not feel welcome; there is nothing meaningful for them to do if they do volunteer; they do not feel they have the necessary training to be a classroom aide, to supervise large groups of children on the playground, in lunch rooms or after school activities; or that teachers and administrators discourage their help even if they express a willingness to help at school. When schools make a place for families in the school and help families acquire the skills they need to work with students, the number of volunteers increases.

The reality of increasing school enrollments and decreasing school budgets means that teachers have more students in their classrooms and that trying to meet the individual needs of 30 to as high as 40 students in the upper grade levels is nearly impossible. Decreasing budgets also mean that schools are dropping many of their enrichment programs (art, music, sports, languages, special education) and many of the specialists and support personnel (nurses, counselors, janitors, technicians). Supplementing school budgets by welcoming family volunteers into the school makes good business sense, if nothing else. Teachers who are leaders in family/school practices, who regularly plan for and include families in their classroom activities, have volunteers in their classroom on a regular basis, some have daily parent help. Families who work with these teachers consistently rate teachers higher in teaching ability, understanding of students and families, and feel the teacher genuinely cares about the progress students are making.

Perhaps the most controversial aspect of family involvement in education is that families should be involved as decisionmakers. Should parents and family members be able to have a voice in teacher/administrator evaluations, hiring and firing? Should families be involved in financial decisions, budget allocations, school policy development, curriculum design, book selections, and program development? When parents are asked these questions they most often respond that families should

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COMMUNITIES, *continued*

"I think it is great when my mom is there to help me because sometimes the teacher sends home stuff I don't understand."

—Andrew, age 13

"I like it when my mom helps me at home. My grades are better and school is easier."

—Joe, age 11

help make decisions concerning school policies, budget, etc. However, the majority of teachers and administrators believe decisions should be left to the professionals, that parents and family members, because they are not trained and involved in education on a day to day basis would make decisions that school personnel could not live with. When family involvement in schools is minimal and not encouraged by schools, there is an attitude of distrust and non-support between families and teachers/administrators. Teachers feel families do not understand the complexities of the teaching profession and families feel teachers do not understand their needs and priorities. In this atmosphere of suspicion, it is quite possible that policy decisions made by families could be unacceptable to teachers. However, when schools have strong family/school partnerships, families are more informed about teachers, schools and programs and they are more supportive. Informed, concerned families make decisions in cooperation with teachers and administrators and are more willing to support the position of their schools.

Schools that include families as decisionmakers, on school committees, site councils and district wide decision making bodies find that they have very strong advocates for the teachers, students and families within their schools and in their communities.

Family/School/ Community Partnerships

One area of school partnerships that has not be given much attention is partnerships with community organizations and businesses, either in the many research efforts or in the assistance provided to schools on forming family involvement plans. Communities have a vested interest in the well-being of children. Children represent future employees for community businesses and future citizens of the community. If a child's school experiences are not successful, communities will suffer from lost citizen potential, criminal justice cost, expensive rehabilitation or financial support programs.

Every community has organizations that are directly involved in providing support services to children and families: health services, cultural groups, government and non-profit agencies, professional organizations, before and after school care programs, community recreation programs, and church organizations - often called the faith community. Each of these organizations has a interest in and responsibility for children's education and success. Most schools have only the most minimal connections with these organizations. For example, child care or after school recreation programs may use school buildings after hours for their programs, but little or no effort has been made to extend the learning that occurs at school into the program.

Schools that value the resources that are available in their community, however are extending the school environment into their communities. Partnerships that schools form with businesses and organizations can have multiple benefits. For example: locating a health clinic at a school site makes health care services available to more children and lowers cost to families and health care providers; students' working several hours a day at a local business as part of a vocational or technical education program extends school learning, benefits the employer and pays the student; students' volunteering at non-profit service organizations such as the Infant Learning Program or homeless shelter as a part of their "learning about community" curriculum expands a child's learning about their community and the needs of its citizens. Schools that extend school involvement into the community gain another bonus. Within every community there are talented and caring people who, even though they may not have children enrolled in public school, are more than willing to share their time and talents at schools.

Closely attached to almost every school environment are the professional organizations that support teachers, administrators and families. The extent to which schools use these organizations as a resource depends on the level of family involvement at the school.

Parents and families have traditionally had access to a nationwide association. The Parent Teacher Association (PTA). Founded in 1897, the PTA has been a strong advocate for parents and families. The PTA network includes a nationwide organization that is further broken down into regional, state and local chapters that are centered at individual school sites. The goal of many PTA activities is to involve parents and families in children's education. The PTA

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provides a structure for parents and families to have an official presence at their school, and provides a wide variety of training and educational opportunities to help parents become more involved in children's education, and provides a bridge to link parents, teachers and administrators. Schools that have only minimal levels of family involvement may only interact with their PTA by providing a room for them to meet after school hours. Schools that have strong family partnerships rely on their PTA to provide education and training for families, help develop schools goals, to make critical home/school contacts with all families and coordinate volunteers in school programs.

If Family Involvement Is So Important, Why Isn't Every School Doing It?

In many classrooms and schools, family involvement in education is highly valued—teachers and families are already engaged in exciting and rewarding activities. It is happening in classrooms and schools where teachers have taken the initiative to get training and to develop plans and programs that include families. It is happening in homes where families have been fortunate enough to have contact with innovative teachers or because they have independently learned how to support their children's education. But family involvement in children's education is not happening for all families and unfortunately, it is not happening for those families that need it the most, the "at- risk" or "hard-to-reach families."

One of the myths about family involvement and one of the major reasons cited for not developing family involvement plans is that families who are "at-risk" (low-income, minority, very young/undereducated/single parents, families with serious personal issues like drugs and alcohol,) are not interested in their children's education and will probably never become involved in school activities. The rest of the families are already engaged anyway, therefore elaborate family involvement programs would be a waste of time.

At one time or another, all families are "hard-to-reach." Some families are particularly difficult to contact and involve. The availability varies according to the age of the student, age of the parent, parental background and family structure. Other families are hard to reach if they have serious personal problems such as homelessness, drugs or alcohol. If families are hard-to-reach, it does not mean that they do not care about their children or that they are not capable of helping them. A 1980's study of school practices found that family background or status does not determine the family's effectiveness or ability to encourage, motivate and interact with children as students. Rather, the research shows that family and school partnership practices are more important for children's success than family characteristics such as race, social class, parent education, marital status, income, language, family size or age of the child. The more schools do to involve families, the less the family status explains student behavior.

There are other common barriers that hinder the progress of strong family/school partnerships. These include:

- family involvement is not well understood, not highly valued
- schools of education do not provide training in family involvement
- in-service training in family involvement during the school year is not a high priority
- teachers unions, school regulations may indirectly discourage teachers from contacting families after school hours and no time is available during the school day
- most home/school contacts are negative and tend to be one way
- teachers and administrators may feel parents are not interested
- teachers may feel threatened or fear interference from parents
- there may be serious social class and cultural differences between families and school personnel that hinder effective communication
- families may have had very negative experiences with their own schooling and have negative feelings about their own ability to help children
- families may not feel welcome or valued or understand what schools expect of them
- working families have limited time, energy
- families may lack transportation, child care for in-school meetings, training

"It is clear that the success of Head Start in bringing about substantial changes demands the fullest involvement of the parents, parental substitutes and families of children in its program."

—Head Start Policy Manual

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PARENT INVOLVEMENT, *continued*

Developing Family Involvement Plans

Most schools do not have formal written family involvement plans. Rather the desire to have family involvement is usually stated as one of the school goals and specific strategies to increase family involvement are left to individual teachers. Within these schools the level of home/school/community partnerships will vary widely from classroom to classroom and from school to school within a school district.

When schools make a commitment to strong family/school/community partnerships, they have taken the first step in developing a formal school plan. For family involvement to be successful, families, teachers and administrators must acknowledge its importance and be committed to making it an integral part of their school experience. It is essential that the plan be developed by those it will serve: community members, families, teachers and administrators. The plan must be culturally appropriate to all of the ethnic groups that attend the school.

Joyce L. Epstein states in one of her research efforts that many studies and years of work by educators and families in elementary, middle, and high schools suggest that there are six major types of involvement that should be considered when developing a family/school/community partnerships. Each type of involvement includes many different practices of partnerships and challenges. The six types of involvement are:

- parenting
- communicating
- volunteering
- learning at home
- decision making
- collaborating with community.

Two additional areas of consideration are also very important for successful, comprehensive family involvement plans. They are:

Transitions. Transition plans for families as students move from home, preschool, child care, specialized programs to public school, from one grade level to another, from one type of program (i.e. educational philosophy) to another, from elementary school to high school and higher education. Schools can also build on family involvement practices that families have developed in previous programs.

Education and training of teachers. The future of family and school partnerships rests on improving teacher/administrator education and training. Training should focus on families as organizations, family roles in children's education and connections or linkages between schools and families across all grade levels.

And finally . . .

The goals of family/school/community partnerships are to increase student success, increase the number of families who are actively involved in their children's education at all grade and developmental levels, and to help school administrators and teachers conduct more effective school programs so that more students succeed. When partnerships are formed, the responsibility and the benefits are shared.

Sources of Further Information

The National Committee for Citizens in Education (NCCE). "The Evidence Grows," 1981. An annotated bibliography of 35 studies on parent involvement; and "The Evidence Continues to Grow," 1994. A sequel adding 18 new studies to their previous work on parent involvement.

The Center on Evaluation, Development and Research. "Parent Involvement in Schools," a 300 page collection of the best research and practice available on parent involvement.

Joyce L. Epstein. "Parent Involvement: What Research Says to Administrators" and "School/Family/Community Partnerships. Caring for the Children We Share," theory, frameworks and guidelines for six major types of family involvement.

Calendar of Events

March	*National Nutrition Month*	
March 22-23	*7th Annual Family Child Care Conference*	AFCCA Anchorage 221 E. Northern Lights, Suite 201 Anchorage, AK
March 28-30 New Orleans	*National Head Start Meeting*	
April 9 Juneau	*Alaska Interdepartmental Committee on Young Children, Quarterly Mtg.*	Marilyn Webb 907 465-4860
April 14-16 Anchorage	*1996 Alaska Children's Mental Health Conference*	Gina Macdonald 907 561-4247
May 5	*National Teachers Day*	
May 19-24, 1996 Anchorage, Alaska	*Tenth International Congress on Society for Circumpolar Health*	
June 3-7 Anchorage	*Alaska Head Start Association Meeting*	

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An open letter from Anne Velardi, Head Start Parent

Parent Involvement Does Not Stop At the School Door

Recently, as I was flipping through a book on simplifying your life, I came across a suggestion to cancel your newspaper subscription and get rid of your television set. The idea is that information from the outside world would be unable to complicate your life. It struck me as a luxury only the very affluent can afford. It certainly would not improve the life of low-income people. Isolating ourselves within our family is a luxury that low-income people cannot afford.

Many people in our society feel that all family problems should be handled within the family. If everyone would only take care of his/her own family, everything would be fine. Families that can't handle their own problems should not be helped by government agencies, but should be left to sink or swim on their own.

The problem with this approach is that it works until you have to step outside your door. Then, other people's unresolved family problems hit you in the face. No matter how hard you try, you cannot have a truly healthy family in a dysfunctional society. For example, you can teach your child constructive problem-solving techniques, but other children bring guns to school.

In order for low-income people to improve their lives, they need to become more involved with society, not less involved. This means educating yourself about the political, social and economic issues of the day, registering to vote, exercising that vote, and participating in the political process. It means reading the newspaper, and/or watching the television news. It means discussing issues of the day with other people. It means letting your children be a part of your involvement.

When children see that you believe you can change the world around you, they will come to believe they can change their world. Otherwise our children will come to see themselves as passive victims, not active agents of change.

ANNE

COLLABORATION B·R·I·E·F·I·N·G·S

Working Respectfully with Families

In March 18, 19 and 20, the Alaska Department of Education sponsored a 2 1/2 day workshop to train a group of parents, teachers, administrators and community people on building effective partnerships with families. The training, "Working Respectfully with Families" was conducted by Helen Nissani from the Northwest Regional Labs. The purpose of the workshop is to qualify a cadre of people to train other groups who are interested in developing partnerships with families in schools, communities and other areas. The training included workshops in three areas:

- The Child Within the Family and Community
- Creating Partnerships and Helping Relationships
- Creating Family-Friendly Schools, and
- Developing Home/School/Community Partnerships.

The 30 participants who attend the workshops are committed to extending this information throughout the state to any interested groups. For information about this training, or scheduling workshops with one of the trainers, contact Sandra Berry, Education Specialist at the Alaska Department of Education, 907-465-8707.

Stand for Children

This is a defining time for our children and our nation. Next year, we will witness the last national election year of the 20th Century. The choices we make now as parents, as community leaders, and as citizens will shape our children's future and our nation's future. It is a time to consider how much we value and care about America's children.

On June 1, 1996 over 750 national, state and community organizations representing tens of millions of Americans will observe a national day of commitment to and for children -- "A Stand for Children." Every citizen can and should stand up for children, not just with words but with work; not just with promises but with leadership and investment in children's health, education, nutrition, and economic security for families; not just with a speech or a photo opportunity but with sustained positive committment to improving the quality of children's lives.

On June 1, people from all over America will stand together for children at the Lincoln Memorial in Washington, DC. The more people who stand together for children, the bigger the impact. Children's Action Teams will be forming in every state to help people come together in Washington, DC, or to organize state and community events. Stand for Children Day is the idea of Marian Wright Edelman, founder and president of the Children's Defense Fund. Supporting Stand for Children does not imply an endorsement of any individual organization, it means that you are making a committment to be more aware of children in your daily activities and to take positive, personal steps to improve the quality of life for children in your community and in this country. This day is a day of committment to children, not a partisan political day.

The Children's Defense Fund has agreed to provide assistance to any state or community who wants to support Stand for Children by sending representatives to Washington, DC, or by organizing a Children's Action Team in your area. Call 1-800-233-1200 or 202-234-0095, or E-mail at standinto@mailback.com to find out what's going on in your area or to receive Stand for Children information. Take a Stand!

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Head Start Update

Alaska Head Start Association Convenes in Juneau

The Alaska Head Start Association got off to a strong start this year when it met in Juneau during the week of February 5-9. The Tlingit and Haida program hosted the staff, directors, parents, and friends who came together from around the state for a joint meeting.

One of the highlights of the week , included twelve parents, testifying before the Children's Caucus on the impact Head Start has made on the lives of families. The "Gavel to Gavel" program televised the parents, who did an outstanding job speaking from their hearts! Buttons and Advocacy dolls were distributed to all members of the legislature, and everyone got a chance to bring their senators and representatives up to-date on local Head Start issues and events.

Thursday afternoon, the Alaska Head Start Association held a reception honoring Governor Knowles for his work advocating for children and families. They presented him with a sculpture created by artist Charlie Apangalook made from antler and bone which represented the "Our Children's hearts are in your hands" theme which prevailed throughout the week. (See following article on the award presentation.) Governor Knowles seemed truly honored to receive such an award. Entertainment was provided by the Tlingit and Haida dance group; they performed beautifully.

The week ended with a joint meeting of the Alaska Head Start Board of Directors. Elections had been held for the two positions for the Board that were up this year; Anne Velardi of Chugiak Children's Services was re-elected to a second term as Region X Parent Representative, and Anna Franks of Fairbanks Native Association was elected to fill the Region XI Staff Seat vacated by Sue Barrett.

Officer elections took place, and the new officers are as follows:

- Sharon Trish, President (Staff Affiliate from RurAL CAP AME Program, phone 543-3401)
- Chester Miyasato, Vice President (Parent Affiliate from Tlingit and Haida Head Start, phone 474-1496)
- Clarence Johnson, Treasurer (Parent from AME Program, phone 438-2612)
- Anna Franks, Recording Secretary (Staff Affiliate from Fairbanks Native Association phone 456-4989)
- Charlie Johanson-Adams, Co-Membership Secretary (Director Affiliate, Chugiak Children's Services, phone 688-6011)
- Sarah Kuenzli, Co-Membership Secretary (Directory Affiliate, Tanana Chiefs Conference, phone 452-8251)

One important change which took place is that the Alaska Head Start Directors' Association (AHSDA) is now called the Alaska Head Start Directors Affiliate - an affiliate of the Alaska Head Start Association. Other issues addressed by the board were the cost of annual membership fees (We are trying to get more members!) and changes in the by-laws. Members of the Alaska Head Start Association will be voting to amend the by-laws later in March. They are also in the process of building up the membership within the different committees —Advocacy, Networking, Training, By-laws, Budget, and Elections and Memberships.

The Alaska Head Start Association's primary purpose is to advocate for children and families. The general feeling at the end of the week was that Head Start does have a strong voice—and cares deeply about what happens to Alaska's families. The important thing to do now is to keep that voice loud. If you would like information on how to share your concerns with the people who represent you in Juneau, please contact any member of the Alaska Head Start Board of Directors.

—from Anna Franks, AHSA Recording Secretary

". . . the next seven generations."

The Alaska Head Start Association presented Governor Tony Knowles with a sculpture created by artist Charlie Apangalook as an expression of their appreciation for his commitment to Alaska's children and families. This piece of art was created especially for the Governor and the Children's Cabinet with this quote as its vision:

"In every deliberation we must consider the impact of our decisions on the next seven generations."

Each piece of the sculpture is significant:

- The base is a disc from the whale neck vertebra - to symbolize our need to find solutions before situations reach a critical point. We do not want to get "up to our neck in trouble" before we find a solution.
- Next is the caribou antler—the tips are what are seen first from a far distance. This is to symbolize the importance of vision for our children and families. We need to create plans now that will be positive and nurturing for them in the years ahead.
- The face symbolizes humankind and has been created from the second rib of the whale - the area that protects the heart.
- The antler is in the form of a hand - and in the legend of the bear the left is the loving palm. Here we have humankind being embraced by that love.

Promotion of our families' strengths is so very important. We thank you for putting our children first in the state of Alaska. *"Our children's hearts are in your hands."*

Artist Charlie Apangalook—The sculpture represents our vision that decisions we make today will impact the next seven generations.

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Children's Cabinet Receives Prestigious Danforth Grant

Governor Knowles announced that Alaska has been selected as one of three states to participate in the Danforth Foundation's Policymakers' Program. Knowles' Children's Cabinet applied for the competitive program which will help Alaskans revitalize their vision for healthy, educated children and families.

"Alaska has been selected to take part in a public-private partnership to retool and rethink the way we can make children healthy and ready to learn," Knowles said. "We must address children's needs in a comprehensive manner and the successful application to the Danforth Foundation proves that my cabinet's broad and inclusive approach to children's issues is the right way to go."

The Missouri-based Danforth Foundation specializes in seeking innovative ways to improve education and the delivery of human services. The award includes intensive technical assistance from the development of a new statewide strategy for the delivery of services to children and families. Alaska will then be eligible for additional grants from the foundation to implement the plan.

The Policymaker's Program is intended to produce a clear definition and agreement about the role and responsibility at the state, regional and local levels in providing collaborative education and human services for children and families. The grant will produce a statewide action plan that involves:

- the support and commitment of key stakeholders;
- direction to the state in reforming how services are delivered with and by communities;
- building support and capacity within communities to plan, deliver and evaluate services and;
- identifying an infrastructure to continue ongoing community efforts.

The Danforth Foundation will provide specific technical support to identify ways to:

- encourage cooperation among education, health, labor, legal and human service systems;
- develop comprehensive approaches for improving children's school readiness and school performance;
- rethink funding systems and finance systems; and
- gain knowledge and skills needed to build coalitions for comprehensive reform.

The award includes $5,000 to form a team of state and local leaders to begin work on the plan. Team members will be appointed by the governor and will represent parents, the Legislature, local school boards, municipal governments, school superintendents, direct service providers, business and other stakeholders. The planning team will meet in Alaska prior to attending the foundation program in St. Louis, Missouri August 10-15, 1996.

The team also will help develop the strategy for the Children's Summit, a conference planned for next year which will help communities develop and implement local education and human service plans.

"I am excited about this new effort," said Education Commissioner Shirley Holloway, who led the effort to win the grant. "The Policymaker's Program will give Alaska the push it needs to create a new vision for delivering services to families and children. Sometimes state policies work at cross purposes. Our programs are budgeted separately and administered top down by different agencies with little understanding or involvement of the school and community. Through this program we intend to change this so that the focus of service delivery is at the community level."

The Danforth Foundation, established by Mr. and Mrs. William H. Danforth and their family in 1927, is a national educational philanthropy dedicated to improving the quality of teaching and learning. The Policymaker's Program is co-sponsored by the Education Commission of the States, the National Governor's Association and the National Conference of State Legislatures. The states of New York and Maine were also selected this year to participate in the program.

For more information on the Children's Trust, the Danforth Foundation Grant and other activities of the Alaska Children's Cabinet, contact Nila Rinehart at 465-4870.

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Changes to Children's Trust Designed to Help Prevent Abuse, Neglect

At a recent press conference, Governor Tony Knowles announced his reorganization of the Alaska Children's Trust. Governor Knowles said this is a solid first step in preventing the cycles of child abuse and neglect and promoting positive parenting and healthy families. Knowles' changes to the Children's Trust became official Saturday, March 9 when Executive Order 96 took effect.

"When the Legislature created the Children's Trust in 1988, it recognized the importance of funding programs that help prevent child abuse and neglect," Knowles said. "Unfortunately, once the trust was set up, it never received a dime. It's time to change that."

Knowles announced the goal to build the trust into a permanent endowment for prevention programs. The trust is to be funded through public and private donations; only its earning will be spent. The Executive Order reorganizes the Children's Trust by placing it in the Office of the Governor and establishes a new trustee board comprised primarily of private-sector members.

Knowles soon will announce appointments to the new board and kick off a statewide educational and fund-raising campaign for the Children's Trust. Reviving the trust was one of the main recommendations of the administration's transition team and the Governor's Children Cabinet, which includes the Attorney General and the Commissioners of Education, Public Safety, Health and Social Services, Community and Regional Affairs and Corrections.

The Children's Cabinet this week hosted Michael Petit, Deputy Director of the Child Welfare League of America, who reminded the commissioners that Alaska leads the nation in substantiated cases of child abuse and neglect. Petit said prevention programs are the most effective tool in the fight against abuse, neglect and family violence.

STATUS REPORT

Education in Alaska

A recent survey of Alaskan voters found that:

- 57% of voters are unaware of (Alaska's) Foundation Formula for school funding. Another 9% are aware of its existence but unfamiliar with how it works.
- Only one in three Alaska voters believes that significant increases in education funding would improve the quality of education
- 45.4% of Alaska voters strongly agree and 32.7% mildly agree that parental involvement at all schools should be changed, improved or structured differently, that parents are in the best position to make decisions regarding education, as opposed to the current system wherein decisions are made by district administrators, superintendents and school boards.

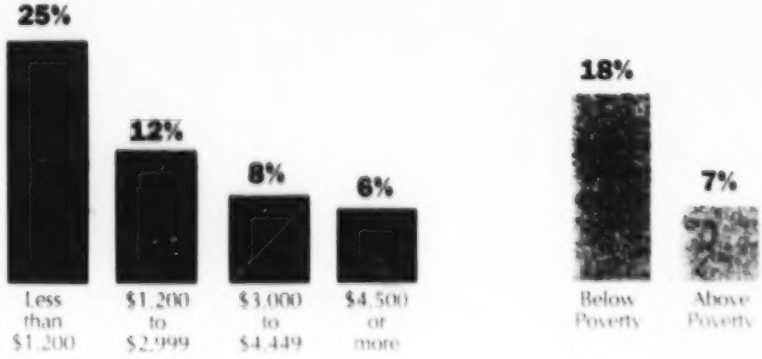
source: Alaska Department of Education, Education Survey 1995

Television in America

- Parents spend 38 1/2 minutes per week talking with their children
- Children watch 1,680 minutes of TV per week
- Children spend 900 hours per year in school
- Children watch 1,500 hours per year of TV
- Children see 8,000 murders on TV before finishing elementary school
- Children see 20,000 commercials per year on TV

source: Child Care Connection News - "TV Free America"

Percent of Monthly Family Income Spent on Child Care*



**Limited to families with a preschooler.*
source: U.S. Department of Commerce, Census Bureau Current Population Reports, September 1995

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Children

Alaska Head Start State Collaboration Project
Alaska Department of Community and Regional Affairs
P.O. Box 112100
Juneau, Alaska 99811-2100

Become an
Alaska Head Start Association Member

The Alaska Head Start Association is a nonprofit membership organization representing Head Start children and parents, staff, directors and friends in Alaska. It is governed by a Board of Directors composed of elected representatives from parents, staff, directors and friends affiliate groups statewide.

The goals and objectives of the Association are:

- To establish and maintain a process that enables the entire Head Start community to express its concerns and recommendations on matters relating to Head Start in Alaska;
- To establish, maintain and insure communication among Head Start programs statewide;
- To provide leadership and serve as an advocate for issues affecting the Head Start program and services to children and families statewide;
- To network with agencies, organizations and associations statewide and nationally to insure Alaska's participation in issues affecting children, families and staff in Head Start programs.

When you become a member of the Head Start Association, you benefit by receiving:

- Bulletins, Alaska's Children Newsletter and other informational mailings
- Voting privileges in Association business and issues
- An opportunity to be elected to the Board of Directors
- Participation in association committees (Budget and Resources, Advocacy, Training, Elections and Membership, By-Laws)
- Involvement in statewide activities on behalf of children and families
- Communication with other parents, staff, directors and friends in the Head Start community
- Training opportunities
- Participation in affiliate group activities.

Joining the Alaska Head Start Association is as easy as contacting Charlie Johanson-Adams, Association Membership Secretary at Chugiak Children's Services, P.O. Box 670233, Chugiak, AK 99567 - phone 688-6011. Membership fees are individual payments beginning at a minimum of $5.00 per member. Individuals are encouraged to determine the amount they are able and willing to pay at or above $5.00.

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Alaska Head Start State Collaboration Project

Alaska Department of Community and Regional Affairs • Quarterly Report • Summer 1996

PS 026091

Alaska's Children

Sunshine From Darkness*

Mental Health is a term that often brings to mind "mental illness". Out attention is continually focused on people with serious mental health needs by news media, television programming, movies, and community issues. Drugs, violence, juvenile crime, suicides, serious injuries and death capture our attention and focus our fears on the behavior of mentally ill people. Mental health, however, is a continuum which stretches from the mental illness end where people need intensive intervention and treatment services—

Please turn to next page

Title taken from art work for the October 1991 Mental Health Awareness poster-artist, Ruth McDowell, retired nurse, diagnosed as manic depressive in 1985

The Alaska Head Start State Collaboration Project is funded by a grant from the U.S. Department of Health and Human Services.
For more information, contact the Alaska Head Start Office at (907) 465-4860.
Project Director–Marilyn Webb; Newsletter Editor–Dorothy Douglas

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Sunshine from Darkness, *continued*

all the way to the wellness end where individuals are healthy and productive and managing their lives with energy and skill. Most people live their lives somewhere in between these two ends of the mental health spectrum. The majority of people live as well as they can, using positive family and community supports, and life skills; they continue to learn ways that enable them to cope with problems. When people are lacking these supports and skills, they slide toward more negative mental health practices.

Everyone experiences good and bad days: from early childhood through adolescence, adulthood and into the elder years. To be mentally healthy means we have the capacity to cope with all of life's circumstances, the highs, lows, and the joys and sorrows. Mental Health in its simplest form is the capacity to:

Love The ability to form meaningful relationships and have positive self-esteem

Work The ability to be and feel productive and contribute to society

Play The ability to play, relax and use leisure time in a manner which renews energy

The National Head Start program, from its beginnings, recognized that mental health intertwines with every aspect of the program and affects every participant from administrator to staff, to parent, to child and on into the community. Some Head Start families often face extreme stressors in their lives. Poverty, violence, substance abuse, poor health, developmental and physical disabilities, isolation from community supports, and single parent households may affect their healthy functioning. The emotional energy that is necessary to deal with these complex issues can easily push children and families toward the negative end of the mental health scale and their behaviors will reflect their inability to cope with these stressors.

The Head Start program is a comprehensive model of services comprised of four major components: Education, Social Services, Parent Involvement and Health (medical, dental nutrition, and mental health). Program performance standards and objectives were written for each of these components and serve as a guide for state and local Head Start program development. Each program must meet the minimum requirements of these standards. Because Head Start is a comprehensive model of services, mental health is incorporated into the standards and objectives for each component. The mental health component provides overall guidance for Head Start mental health care.

In the first Head Start programs, the mental health component was known as Psychological Services. It provided direct services which included evaluation and treatment of Head Start children and their parents. The emphasis of the program was on intervention and treatment of specific mental health problems - dealing with mental health issues after they had become problems. In 1973, the philosophy and name changed to Mental Health. The change was designed to reflect a shift of emphasis from treatment activities to prevention and to reflect the change from viewing mental health from a wellness perspective, not as an illness.

To approach mental health from a wellness perspective means having a holistic approach which addresses all of an individual's needs: physical, emotional, social, cognitive, occupational, and spiritual.

To be mentally healthy means we have the capacity to cope with all of life's circumstances, the highs, lows, and the joys and sorrows.

The *physical* aspects of mental health include:

- physical health
- good nutrition habits
- fitness and exercise
- dental health

The *emotional* aspects of mental health include:

- how we feel
- how we express ourselves
- our ability to solve problems
- our ability to love
- our ability to cope with stress
- our ability to challenge ourselves
- our ability to master negative emotions (anger, jealousy)

The *social* aspects of mental health include our ability to:

- form meaningful relationships
- develop our interpersonal skills
- make and keep friends
- behave in socially acceptable ways

The cognitive area of mental health involves:

- development of the intellect
- the ability to learn new skills
- curiosity and an interest in learning
- problem-solving skills
- the ability to learn how to get new information

The *occupational* aspects of mental health allow us to:

- develop our productivity so contributions can be made to community and society
- qualify for better paying, more satisfying work

The *spiritual* aspect provides:

- internal guides for living

Head Start's primary mental health goals are to:

- Focus on prevention. Using a holistic approach to mental health, Head Start program activities are designed to help staff, parents and families learn and practice skills that help them remain healthy.

- Identification and referral of potential mental health problems. Through observation, screening and assessments, Head Start helps families to detect issues and problems that may interfere with a child's healthy development.

- Treatment. If problems are identified, Head Start develops a health care and treatment plan using family, program

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and community supports as well as specialized services if needed.

- Provide mental health care to parents, families staff and community members. A child benefits most when those who influence their lives understand, value and practice positive mental health skills. Head Start mental health services are extended to staff, families and into the community as needed.

Head Start Performance Standards and Objectives, are designed to be flexible so that programs can fit the individual needs of its children, families and their communities. In Alaska, a health care program has been developed that fits our unique and varied population.

FAMILY WELLNESS

Head Start Mental Health Standards require that a mental health professional be available to Head Start to perform certain clearly specified functions and activities. The standards also outline activities which may be performed by a mental health coordinator. In Alaska, many of the Head Start centers are located in small, isolated villages and the only health care services available are those of an itinerant public health nurse. Even in larger communities in Alaska, there may be only one or no mental health care practitioners. In order to meet the requirements of the Mental Health Standard, Alaska Head Start developed the "Family Wellness" project.

The resilience model is the foundation of the Family Wellness Project. It is a perfect fit with the underlying philosophy of Head Start which emphasizes building social competence in children and families. The resilience model shifts the focus in the human services field from crisis management to primary prevention and early intervention. It is through prevention that human services providers, such as Head Start can help children become less vulnerable in the face of life's hardships. By doing so, children will be helped to learn the social competence/coping skills to negate difficulties they will face. The result will be fewer children who need crisis intervention down the road.

Resilient children are those who:

- have the ability to adapt to and overcome factors that place them at risk
- defy expectation by developing into well-adapted individuals in spite of serious stressors in their lives
- have the ability to bounce back successfully despite exposure to severe risks
- cope effectively with internal and external sources of stress. Even through the most stressful experiences in the most at-risk families, some individuals appear to emerge unharmed, and to develop a stable, healthy personality.

In Alaska, many of the Head Start centers are located in small, isolated villages and the only health care services available are those of an itinerant public health nurse.

Research on resiliency has identified specific risk factors that increase children's vulnerabilities and protective factors that decrease the impact of these risk factors on the child. Risk and protective factors can be something with which a child is born - internal factors, or something that is present in the child's world - external factors. No matter if the factors are internal or external, all children experience risks, the difference is only in the degree of risk and the amount of protective factors present for that child. The risk or protective factors are not the exclusive property of the child, they are shared by the family and the community in which the family lives. When risk and protective factors are present in the family and the community, they are also present for the child.

The purpose of the Family Wellness project is to:

- organize all the information gathered through the Family Needs Assessment
- identify what risk and protective factors might exist in the child's life
- develop strategies for the family and staff to strengthen protective factors and reduce the impact of risk factors
- use this information in the child's Individual Learning Plan.

The project was developed over a period of four years, beginning with a needs assessment and development of the components of the project. Two Head Start communities were chosen as sites in which to test the components and further refine project materials. In 1994, the Family Wellness Demonstration Project was begun at Tlingit and Haida Head Start and Chugiak Children's Services, Inc. Head Start. Four sites were selected from the two programs. At each site a Family Wellness Facilitator and two Family Wellness Advocates were hired and trained to use the three modules developed for the project. At the beginning of the school year, Head Start families were told about the project and given the option to participate. Working with the Family Wellness Coordinator and Advocates, as well as Head Start staff, the Head Start families who wished to participate completed the following family wellness assessment components.

- Head Start Application - provides information on family economics and education levels
- Child Health Record - provides information on a child's prenatal and first year physical health
- Parent Interest List - provides information on family interests and needs such as housing, and job training
- Family Wellness Interview - a comprehensive questionnaire to gather information on family strengths and stressors
- Kinship Map - a tool for gathering family history and assessing family support networks
- Developmental Screening - a way to check how a child is doing in basic skills such as motor, language, and social
- Child Behavior Checklist - a screening devise for social-emotional functioning.
- Child Observation - watching to see how a child uses her/his skills in the class
- Family Visits - Family Wellness

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Sunshine from Darkness. *continued*

Advocates and Teachers conduct family visits which are used to gather information from the families in order to develop the Integrated Family Wellness Plan.

Information and data collected over two years at the demonstration sites is currently be compiled and evaluated. Preliminary results indicate that the project has had a very positive impact for families and that Head Start staff and communities can also benefit from the project (see following article). Future plans for the project include continuation of the project at the demonstration sites and expansion of the project into other Head Start communities. For more information on the Family Wellness Project, contact the Alaska Head Start Office at 907-465-4860.

EXTENDING HEAD START SERVICES INTO THE COMMUNITY

One of the reasons that Head Start has continued to be successful since it began over 25 years ago, is because it is a community-based program. The structure of the organization is flexible so that programs can be designed to meet the individual needs of the children, families and communities in which they live. A program design that works for an urban area such as Anchorage, would not fit the needs and culture of a rural village, even though they all meet the Head Start Performance Standards.

In rural areas of Alaska, Head Start centers can be a strong focal point for many community activities, from the use of the center building for meetings and celebrations; to sharing training or health care opportunities with other community members. Because many communities are so small, events that impact one family often impact the entire community. Tragic events such as the death of a village elder does not just affect the immediate family, it is felt by the entire village population. When tragic events occur, Head Start services are quite naturally extended beyond those families officially enrolled in the program. When a community begins the healing process, then the stress in the daily lives of it's children can be lessened.

In Alaska, we are used to long winters and heavy accumulations of snow and rain. Each spring we anticipate flood conditions in many rural areas as the snow and river ice begins to melt and break up, and spring rains contribute to the volumes of water moving through our rivers and lakes. What we do not often anticipate or expect is a wildfire that will devastate an entire community. Unusually light snowfall last winter and lack of spring rainfall, however, created drought conditions in many parts of Alaska. Stands of spruce trees towering over a carpet of dried grass, moss and forest debris were dried out and dangerous. In early June a small fire took hold in this volatile setting near the community of

One of the reasons that Head Start has continued to be successful since it began over 25 years ago, is because it is a community-based program.

Houston, in Southcentral Alaska. Initially burning about 60 acres, high winds and low humidity fed new life into the fire and it assumed a monstrous life of it's own. The fire burned out of control until 1300 firefighters, aided finally by a light rainfall, were able to bring the fire to a standstill. Early damage assessments of the fire report that about 37,800 acres were swept by the blaze, 344 structures were burned including homes, businesses and other buildings, for an estimated loss of $10 million, over 1800 people were evacuated from their homes. It was not until the week following the fire, when residents were finally allowed to return to their homes, that the real losses began to be realized: over 250 families lost their homes and all their possessions in the fire; health hazards exist from damaged oil or gas tanks, burned toxic substances, contaminated water sources and ash deposits. Residents will be coping with severe emotional stress and grief as they cope with their loses and the overwhelming tasks of rebuilding their lives.

The process of recovering from a disaster that affects our lives and our community often takes on a predictable sequence. We react as necessary to the initial disaster, seeking shelter and safety. Neighbors, community members, people outside of the disaster area, government and businesses work toward a common goal of providing basic needs and comfort for victims. The assistance often extends beyond this crises period as victims begin to assess their losses and long term needs. The initial response to the crises situation may last only a few days, but the long term recovery may last up to three years as victims struggle with disillusionment (depression frustration, anger), coming to terms with their losses, working through the grief and moving on to a new beginning.

The Chugiak Children's Services, Inc. (CCS, Inc) Head Start center in Houston, Alaska serves 20 families from the surrounding area. Even though the Head Start center was closed for the summer break, staff immediately became involved in the community disaster relief efforts. Initially, the Family Wellness Advocate made contact with all the Head Start families to make sure they were safe and that their basic needs were met. Contact was also made with other staff, newly enrolled, and past enrolled parents to help determine their needs. Head Start staff members from outside of the Houston area volunteered at shelters, provided emergency housing for fire evacuees and firefighters. Immediately following the emergency efforts, Head Start staff met and discussed the options and actions they could take to assist the community. Following is the short list of projects they will be pursuing:

1. Assist in the mobilization of the National Cooperative Disaster Child Care team. A team of five will provide on-site guidance, training and care for fire victims and their children. The team will be lead by Beryl Cheal from the Head Start TASC Center in Oregon. Two staff members from the Tanana Chiefs Head Start program, who worked with families during last year's flood disaster will be assisting Ms. Cheal. The team will also provide training to the community at large. The training centers around the effects on children and families during a disaster and follows up through the transition over the next few months. Chugiak Children's Service Head Start will act as liaison to the team and

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provide the Big Lake/Houston Head Start center as a base site.

2. The team will also be working at the Wasilla Head Start program assisting the Good Shepherd Child Care program. This group has mobilized in response to the shelter's need for child care (ages 18 months to 10 years) within the Wasilla community. CCS, Inc. will pay the rent for the duration of the time the child care needs the facility and coordinate transportation for the program. Arrangements for the use of Head Start buses, which are stored for the summer, are being pursued.

3. The Chugiak Site Coordinator is heading an effort to organize summer programs for youth fire victims between 10 and 13 years of age. Efforts include helping to organize summer camps, sponsoring the Campfire program to run a summer session in Wasilla or Big Lake/Houston, providing tuition/fees for families.

4. The Family Development Services Leader is involved in an effort to provide summer employment for 14-18 year olds to help in the clean-up and rebuilding efforts through the Youth JOBS program or the JTPA.

5. Currently, the CCS, Inc. is working on a longer-term project to assist families and children with the difficult transitions they will be making over the next 18 months to two years. One of the efforts will be exploring funding to build up the Family Wellness program in the Big Lake/Houston area. The program would be extended to all families affected by the fire regardless of the children's ages or Head Start status. A second effort will be to expand the Head Start program in general in anticipation of increased enrollments next fall. As a result of the fire, more families in the area will now qualify for Head Start Services.

Because Head Start staff have experience and expertise in dealing with stresses that affect children and families, and because Head Start had established a respected presence in the community, their efforts have been both welcome and valued. They serve as an outstanding example of the Head Start philosophy of providing comprehensive services to children, families; and responding to the sometimes intense needs of communities.

STATE MENTAL HEALTH SERVICES IN ALASKA

The Head Start program serves a small, but vital, segment of Alaska's population. The majority of our residents, who need mental health services must turn to other service providers. If they are fortunate enough to have medical insurance that covers mental health services, or have the financial resources to pay for help, there are some private mental health practitioners available in Alaska. However, because of

For Alaskan's who do not have the financial resources or who live in remote areas with limited services, getting any type of health service is a challenge.

Alaska's sparse population, most of the private mental health practitioners are located in the larger urban areas. For Alaskan's who do not have the financial resources or who live in remote areas with limited services, getting any type of health service is a challenge. The main option available is to use the services provided by the state or federal government.

The responsibility for planning, delivery and funding for children's health services is spread among various departments and among various divisions within those departments. Determining who has responsibility for a particular program or service can mean sorting through a maze of state and federal rules, regulations, funding streams, planning boards or councils, reports, needs assessments, and even court cases. Mental health services for children and their families are no less complicated a puzzle than other types of health services.

Following is a brief description of the planing processes and types of mental health and related services that are provided in state government programs.

The Planning Process for Mental Health Services—There is no easy answer

The Alaska Mental Health Lands Trust. The bulk of the state's planning for mental health services occurs as a result of a complicated legacy from the territorial government days before Alaska obtained statehood. Prior to 1956, there were no services available for children and adults who were mentally retarded or mentally ill and who required intensive treatment. People had to be declared "criminally insane" and transported out-of-state for hospitalization. To change this situation, Congress transferred responsibility for mental health programs from the federal government to the Territory of Alaska through passage of the Alaska Mental Health Enabling Act of 1956. The Act also granted to the Territorial Government, one million acres of land as the Alaska Mental Health Lands Trust to support development and implementation of a mental health program. The land and any income or proceeds generated were to be administered by the Territory as a public trust.

The Alaska Statehood Act transferred the mental health trust lands from the Territory to the State. Mental health lands were among the first lands selected by the state and they were among the most desirable both for public and private use. With pressure mounting to exchange mental health trust lands for general grant lands, in 1978 the Alaska Legislature passed laws redesignating mental health lands and other trust lands as general grant lands. In an effort to comply with the intent of the original trust legislation, the legislature also established a separate mental health fund which was to be financed by 1.5% of total revenues derived from management of all state land. Although the legislature did appropriate money for mental health services from statehood forward, no money was ever appropriated to the mental health fund.

With the redesignation of the mental health lands from trust lands to grant lands, the state was able to sell or convey title to the land and began to dispose of the trust lands. Up to 50,000 acres was conveyed to private individuals; over 40,000 acres was conveyed to municipalities and over 35,000 acres were placed in legislatively designated areas such as state parks, forests and wildlife areas. Only about 35% of the original 1 million acres remained unencumbered by 1985.

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Sunshine from Darkness, *continued*

Late in 1982, mental health advocates filed a lawsuit against the state in an effort to restore the lands trust. Initial court decisions held that the state had not followed the intent of the original trust legislation. A series of long and complicated court challenges and legislative proposals followed until finely in late 1994, the courts finally accepted legislative statues and amendments and settled the legal issues. Among provisions of the settlement were:

- The appropriation of $200 million for a mental health trust fund
- A legal definition of who could benefit from the mental health trust. Beneficiaries of the trust include all persons, past present and future who are: mentally ill; mentally deficient or retarded; chronically alcoholic and suffering from psychoses; senile and as a result of such senility suffering from major mental illness and other such persons needing mental health services. Specific definitions of each of these beneficiaries groups and the services that can be delivered using Trust funds were also established. Each of these beneficiary groups are served by their own planning board including: The Alaska Mental Health Board, The Governor's Council on Disabilities and Special Education, The Alaska Commission on Aging, and the Advisory Board on Alcoholism and Drug Abuse.
- The establishment of a trustee for the trust fund designated as the Alaska Mental Health Trust Authority within the Department of Revenue. The Authority is charged to use its expertise in land management, investment and/or services to the designated beneficiary groups.
- The establishment of a new planning process for mental health services. Prior to the final settlement, the Alaska Mental Health Board served as the trust board in consolidating, analyzing and making recommendations to the legislature regarding funding requests of each of the beneficiary groups. Under terms settlement, no single entity can control the mental health planning process for the state, rather all four boards are now required to work together. The Department of Health and Social Services, in conjunction with the Trust Authority will prepare revise and amend a plan for an integrated comprehensive mental health program. Each of the four beneficiary group boards individually prepare and maintain a plan of services for their beneficiaries and propose an implementation plan that is consistent with the DHSS comprehensive plan. Each board makes recommendations to the Trust Authority in regard to the comprehensive program and the use of Mental Health Trust income account funds.

Late in 1982, mental health advocates filed a lawsuit against the state in an effort to restore the lands trust. Initial court decisions held that the state had not followed the intent of the original trust legislation.

The definitions of who can be served and the services they can receive from The Mental Health Trust funds tend to be quite restrictive and oriented toward clinically diagnosable disabilities and mental illness. Consequently planning efforts by the four boards lean toward serving those populations who require moderate to intensive treatment and intervention. Prevention strategies and providing mental health wellness services are among the lowest priorities. Only two of the Boards address young children in their long-term state plans due to the restrictive definitions of the beneficiary groups. Following are brief descriptions of these two Boards.

Governor's Council on Disabilities and Special Education The Council serves those people who are experiencing a severe chronic disability that:

- is attributable to a mental or physical impairment or combination of mental or physical impairments
- is manifested before the person attains the age of 22
- is likely to continue indefinitely
- results in functional limitations in three of the following major life activities: self-care, receptive and expressive language learning, mobility, self-direction, capacity for independent living and economic self-sufficiency; and
- reflects a person's need for a combination and sequence of special, interdisciplinary or generic care, treatment or other services that are lifelong or of extended duration and are individually planned and coordinated.

During Fiscal Year 1993, there were 8,489 individuals with disabilities who used state services. At the same time, there were an additional 350 children on waiting lists for early intervention services and over 500 Alaskans who have requested immediate community based services but have been placed on waiting lists.

The Council is comprised of 26 public members appointed by the Governor and is served by 4 paid staff. The principal roles of the Council are to:

- Act as the state's planning and coordinating council for people with developmental disabilities.
- Govern the Special Education Service Agency (SESA). SESA serves children ages birth to 21 in all school districts. It's mission includes making special educational programs and services available, encouraging cooperation between districts and agencies, and assisting districts in providing public education for exceptional children with highly specialized needs.
- Serve as the Interagency Coordinating Council (ICC). Each state under federal Individuals with Disabilities Education Act (IDEA) is required to

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have an ICC. The ICC is the coordinating council for statewide early intervention services to children ages birth to three who are at risk for developmental delays.
- Serve as the Special Education Advisory Panel. IDEA also requires each state to have a Special Education Advisory Panel and mandates the Council act as that Panel.
- Assist the state in developing a comprehensive system and coordinated array of services for people with disabilities.
- Provide to the Alaska Mental Health Authority recommendations concerning the mental health trust income account.
- Advocate for people with disabilities through public information, legislation, program review, monitoring, and evaluation, etc.

The Council prepares an annual report of their activities and a long range plan for services. The current plan "Developmental Disabilities Plan for the State of Alaska, Fiscal Years 1995-1997," is a comprehensive report about the council, its past and present activities, and the action plans for identified priority areas for funding and service delivery. The Plan is submitted to the Mental Health Trust Authority as required for funding requests.

Alaska Mental Health Board. The Board is the state planning and coordinating body for mental health services in Alaska under both state and federal law. The Board is comprised of 13 public members with 4 paid staff members. It represents all people served by the state's mental health programs. The Boards primary duties include:
- providing a public forum for discussion of mental health issues
- determining the needs of people served by state mental health programs
- preparing and updating long-term comprehensive plans, projecting need and resources to meet that need and annual implementation plans
- evaluating the effectiveness of the prior year's plans and evaluate program performance and recommend improvements
- advising and reporting annually to the legislature, governor, Mental Health Trust Authority and other state agencies on issues affecting persons with mental disorders
- providing to the Mental Health Trust Authority recommendations for the integrated, comprehensive mental health program of the state and use of the mental health trust income account
- serving as an advocate for those served by the mental health program of the state
- promoting efficient and coordinated use of federal, state and private funding resources
- reviewing relevant statutes, regulations and policies; and recommending appropriate changes.

In its annual report for 1994, the Board identified program comprehensiveness as one of their major goals, i.e., the need to provide a full range of services .. "for over 20,000 Alaskans of all ages with severe mental disorders including mental retardation, persistent mental illness, and other mental impairments . . . "In addition to these groups of persons most severely affected by mental disorders, the comprehensive program must address the service needs of another 10,000 individuals yearly manifesting milder forms of mental illness and a like number suffering from substance abuse disorders. Major goals do not address wellness and prevention strategies.

In its annual report for 1994, the Board identified program comprehensiveness as one of their major goals, i.e., the need to provide a full range of services .. "for over 20,000 Alaskans of all ages with severe mental disorders including mental retardation, persistent mental illness, and other mental impairments . . . "

In addition to publishing an annual report, the Board has completed a long range planning document, "A Shared Vision - The Alaska Mental Health Strategic Plan for the 90s, revised July 1995." This document is the strategic plan for Fiscal years 1993 through 1997 with an outlook to the year 2000. Action plans that include goals and specific strategies for 9 core areas are detailed in the plan.

Other State Planning Efforts. There are numerous other planning documents, strategies and mechanisms that address in whole or part, state mental health services in Alaska. Some planning efforts address *specific service or age groups*, for example the *Child Health Plan* (ages prenatal to 5) or *Alaska's Adolescents - A Plan for the Future*. These plans are comprehensive, addressing all health issues, including mental health, that are a concern for the target group. Planning efforts may be *program specific*, addressing a single project or service such as the recently state funded *Healthy Families* project which serves newborn children who may be at-risk for abuse or neglect and their families. Plans may be required for *funding purposes* in order to obtain new or continued state/federal grant funds, or to report on the use of funds. It is not uncommon for an entirely new service need to be identified in already existing systems when new funding sources become available. Planning efforts may also be included in a variety of other documents such as policies and procedures manuals, annual reports or budget requests. In some cases, planning for a service or program may begin as a result of a conference, speech or action from a policy maker. Currently a comprehensive list of all planning documents for mental health services in the state is not available.

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Sunshine from Darkness, *continued*

Service Delivery of Mental Health Services

Hopefully, all planning efforts are well thought out and capable of being implemented by the personnel and the state departments who are responsible for actually providing the service. Within state government, the departments that have the main responsibility for providing mental health services include: Health and Social Services, Education, Community and Regional Affairs, and Public Safety. Each of these departments, or their grantees, are responsible for developing plans for services, providing the actual services, determining service needs, monitoring and evaluating the services, administering and planning for the funding of the services, and coordinating with other state agencies, federal programs and private/non-profit organizations who may also have mental health programs and services.

Department of Education (DOE). The State has a statutory responsibility to provide a "Free Appropriate Public Education (FAPE) to children, ages 3-21 who are disabled. Disabled children are defined by two federal laws. Under federal law, children must meet the following three criteria: 1) have a physical or mental disability, 2) the presence of such physical or mental disability has adversely affected the educational performance of the child, and 3) because of such disability the child is in need of special education and related services.

The DOE has designated 14 disability categories that must be used to determine whether a student qualifies as a child with a disability. These are:

1. mental retardation
2. learning disability
3. deafness
4. hard of hearing
5. orthopedic impairment
6. other hearing impairment
7. visual impairment
8. speech impairment
9. multiple disabilities
10. deaf-blindness
11. autusim
12. traumatic brain injury
13. seriously emotionally disturbed - This category *excludes* children with other behavior problems including serious conduct disorders manifest through the following behaviors: stealing, running away from home, lying, deliberately setting fires, truancy, commits property crimes, cruelty to animals, physical aggression including cruelty toward people; and also *excludes* children whose behavior is characterized as "oppositional" including: frequent loss of temper, arguments with adults, defying adult requests, deliberately annoying other people, frequently angry, resentful, spiteful, vindictive and uses obscene language.
14. Pre-school disabilities. To be eligible, a child must be not less than 3 years and not more than 6 years of age; meet the eligibility criteria listed above and be certified by a multi-disciplinary team.

Children are determined to be eligible for special education services through a process of referral, evaluation and eligibility determination. Upon eligibility determination for special education services, an Individual Education Plan is developed that details the type and intensity of services, classroom placement and special education services a child will receive.

A school district providing special education services is eligible for state financial aid under the public school foundation program funds. The amount of funds that a district receives is based on the type of services that are being provided. Types of service include: resource services, self-contained and intensive services, homebound/hospital instruction. Federal funds may also be available to school districts where excessive costs above state funding criteria are incurred in providing education services.

Children who are experiencing mental health problems, but do not meet the criteria for special education services, must use other school or community services. Children may use services such as school counselors, nurses or other resource personnel.

Children who are experiencing mental health problems, but do not meet the criteria for special education services, must use other school or community services. Children may use services such as school counselors, nurses or other resource personnel; community mental health centers, public health clinics or private practitioners, if those services are available within their communities. In Alaska, the student populations and education costs have continued to increase, while school funding has remained static. Many schools have been forced to eliminate school nurses and counselors. If schools and communities do not have mental health services available for children and their families, coping with mental health issues may then fall directly on classroom teachers. The experience and training that individual classroom teachers have for dealing with mental health issues is an unknown factor. Also, the extent to which schools integrate mental health wellness skills into their curriculums is unknown.

Currently, 17,500 children are being provided special education services in Alaska schools, at a cost of $101,500 million in state funds, and $2,400 million in Mental Health Lands Trust funds.

Department of Health and Social Services (DHSS). The DHSS has primary responsibility for delivering services to people who require mental health care. The responsibility is spread across several divisions depending of the program component or service group.

The **Division of Public Health** administers prevention and early intervention programs designed to prevent, identify and treat disabling conditions. These programs present the most promising and cost

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effective solutions to reduce the effects of mental or physical disabilities for children and their families. These programs include:

WIC.–Women, Infants and Children. Poor nutrition for pregnant women, infants and children can cause both mental and physical delays and permanent disabilities. The WIC program provides screening for income and nutritional risk, food warrants for food, nutrition education and counseling for high risk participants. Low-income and nutritionally at-risk children and women are eligible for these services.

Infant Learning Program. One of the most important services in the state for at-risk children is the Infant Learning Program. The program provides developmental screening and assessments, identification of potential problems, developmental delays or disabling conditions, establishing a program for educational, therapeutic and developmental intervention for children ages 0-3.

Healthy Baby Program, Prenatal Care II Program. Good prenatal care ensures that a child will receive a healthy start in life. In Alaska, prenatal effects of alcohol, drugs and poor medical care place children at risk for long-term disabling conditions. Alaska leads the nation in a 100% preventable condition, Fetal Alcohol Syndrome and Fetal Alcohol Effects. These programs provide prenatal health care services for Medicaid eligible and other low-income women. Services include health care, education, counseling, and costs associated with delivery and early infant care.

Healthy Kids Program. A continuation of the earlier programs, Healthy Kids extends services to low-income and at-risk children. Services include comprehensive health screening so that problems can be identified and treated as early as possible.

Health Care Program for Children with Special Needs. For children who have been diagnosed with a handicapping condition and whose families do not have medical insurance, this program can help pay for specific hospital and medical costs. Services are limited to specific conditions and families are assisted based on a sliding scale of need, income and expenses.

Public Health Nursing. The frontline of Alaska's health care delivery system are the Public Health Nurses. They are responsible for actual service delivery of most of the programs and services for women and children. More than 50% of the services delivered by PHN's are to children under age 5. For many rural areas in Alaska, the PHN's are the only health care provider available.

The DHSS has primary responsibility for delivering services to people who require mental health care. The responsibility is spread across several divisions depending of the program component or service group.

The **Division of Family and Youth Services** administers programs for children who are at-risk of being removed from their homes or who have been placed in state custody because of severe problems at home. The goal of DFYS is to support parents and families with a variety of services so that children may remain at home or eventually be returned home if they are in state custody. Many children placed in state custody have been neglected, abused or victims of violence and assault. The mental health issues associated with these crimes against children are complicated and often long-term. Social workers act as advocates for both the child and their family. First by assuring the child is safe and referring the child and family to services according to their needs. Specific programs include: foster care, child protection day care, at-risk/transitional child care, JOBS/Native JOBS Programs, family centered services, child protective services, adoption and guardianship, the state funded Healthy Families project and Family Preservation, a state plan developed in cooperation with Alaska Native Tribes for keeping at-risk families together. The Division also administers youth correction programs and facilities for children under age 18 who have entered the justice system as a result of juvenile crime.

The **Division of Public Assistance** and the **Division of Medical Assistance**. Poverty is one of the major contributors to the poor health and functioning of families and thus one of main risk factors in a child's life. There are two programs that help lessen the effects of poverty for children: Aid to Families with Dependent Children and Medicaid. These programs provide financial support and medical care for children whose families are below poverty level. For the majority of families, the need for this assistance is short-term, averaging less than two years. For some families, however the need may extend much longer. The public perception of these assistance programs is that they support lazy parents who should go to work. What the public does not realize is that many families are unable to work because of the extraordinary circumstances in their lives. The parents of disabled children often find themselves impoverished because of the costs of medical care for their child or their children may need constant care at home. There are very limited facilities that provide day care for severely disabled children and very few child care providers that will accept children with even mild disabilities. Often the stress associated with the care and support of a disabled child are so great that parents cannot attend to the demands of a full-time job and cope with their home situation. Some parents are often faced with the choice of signing custody of their child over to the state in order to receive the specialized medical and mental health services that are needed. Additionally, there are developmentally and mentally disabled parents who are unable to get jobs that will cover even the most basic needs for their families. Without financial assistance programs, the children would be placed at even greater risk. These two Divisions are responsible for determining family and service eligibility, provider payments, and program administration.

The **Division of Mental Health and Developmental Disabilities** plan for and provide appropriate prevention, treatment

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STATUS REPORT

The Ten Best States for Child Care:

California	Massachusetts
Colorado	Minnesota
Connecticut	Vermont
Hawaii	Washington
Maryland	Wisconsin

The 13 Worst States for Child Care:

Alabama	Nevada
Alaska	New Hampshire
Arizona	New Mexico
Idaho	North Dakota
Louisiana	South Dakota
Montana	Utah

source: Child Care: How Does Your State Rate: Working Mother magazine, June 1996

Mental Health Care Services in Alaska

Disability Programs

- 2,221 person with developmental disabilities receive support services
- 533 unserved individual are on waiting lists for services

Mental Health Programs

- 10,000 to 15,000 persons with mental illness annually receive treatment and services
- 125 severely emotionally disturbed youth receive on-going services through the Alaska Youth Initiative Program
- 2,339 adults with severe mental illness receive on-going community support services
- 1,615 youth with severe emotional disturbance receive on-going support

source: Department of Health and Social Services, Division of Mental Health and Development Disabilities, Annual Report, Fiscal Year 1994

Education Programs

- 17,500 school age children receive special education services in Alaska's Schools during the 1994-95 school year.

source: Department of Education, Education Program Support, Special Education statistics

Sunshine from Darkness, *continued*

and support for families impacted by mental disorders or developmental disabilities. Although the mental health service population includes all Alaskans with mental or emotional disturbances, Alaska statutes states that service go to persons in the following order:

- a person who is at immediate risk of hospitalization for treatment
- a person who is in need of continuing services due to a disturbance of a severe or persistent nature
- a person who poses a hazard to their own or another's health/safety
- a person under age 18 at immediate risk of removal from home for treatment or at high risk of developing a disturbance of a persistent or severe nature
- a person who is not capable of obtaining assistance from the private sector due to their illness, location, or income
- a person who is suffering from a less severe mental or emotional disturbance that will not require hospitalization in the near future.

To ensure that services are provided to the priority populations outlined above, grant budgets are divided into components that funding for specific services and/or specific populations.

A wide array of mental health services are provided through community mental health centers. Grants were awarded to 31 non-profit service providers. In addition specialized services are provided through 87 grants or contracts with limited service providers and villages. The Division sets the standards for services, awards grants, determines services priorities, monitors for compliance and provides technical assistance. General services for persons who experience depression, suicidal behavior or other serious individual or family psychiatric dysfunctions are provided at 16 centers and 2 limited service providers. Services for youth with severe emotional disturbance are provided at 20 centers and 5 limited service providers.

Services for youth are also provided by the Alaska Youth Initiative (AYI) program. Established in 1985, AYI prevents youth from being sent out of state for care. Services include individualized services for youth with severe emotional disturbance and behavioral issues. Services are provided in the youth's home community and are accomplished through state level coordina-

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Sunshine from Darkness, *continued*

tion and local Core Service Teams who work with the youth and their family to develop a highly Individualized Family Service Plan. This service plan uses existing community resources or develops new services to meet the needs of the youth. These "wraparound services" are provided through flexible funding from the DHSS and DOE.

Statewide inpatient programs are provided through the Alaska Psychiatric Hospital (APH). APH provides inpatient care for adults and adolescents whose needs exceed the capacity of community based service providers through this 80 bed facility serving 4 specialized populations. Adolescents, age 13 through 17 that require inpatient care or have been remanded to the custody of the state through the juvenile justice system can be served in the 12 bed specialized youth population unit. During FY 94, 186 youth were admitted to APH. Services for developmental disabled persons or persons who exhibit difficult behaviors associated with mental illness and require nursing care are provided through the Harborview Developmental Center in Valdez, Alaska. The facility is a licensed intermediate care facility.

The Division is also responsible for providing services to persons with developmental disabilities. Currently, 2,221 individuals and their families are receiving services through community developmental disabilities grant programs. Funding is allocated to 197 communities in Alaska to provide a wide array of services.

Department of Community and Regional Affairs (DCRA). The Alaska Head Start Program is administered through the DCRA. Mental health services provided by the Head Start program have been described at the beginning of this article.

Department of Public Safety (DPS). Alaska has the country's highest rate of physical and sexual abuse. One of every 10 women in the state are abused each year. To combat this serious problem, the state established a system of shelters and safe houses where women and their families could receive care and services. The DPS through the Council on Domestic Violence and Sexual Assault serves as the funding agency for 25 community-based programs that provide comprehensive services for victims and their

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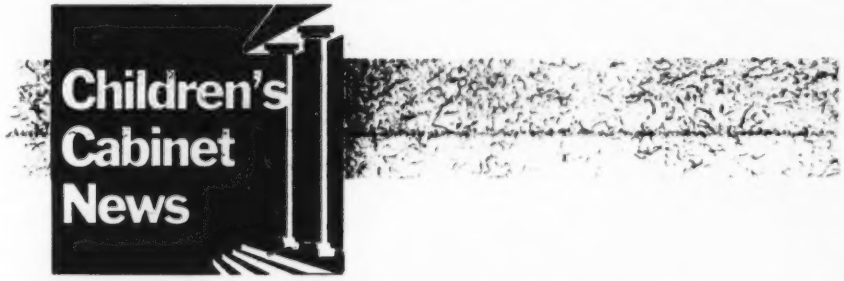
Calendar of Events

October 10-12 Sitka, AK	*Assn. of School Administrator's Fall Conference*	Steve McPhetres 586-9702
October 10-12 Anchorage, AK	*State Literacy Association Meeting*	Debbie Manion 465-9702
October 20-22 Anchorage, AK	*Elementary & Secondary Principals Conference*	Steve McPhetres 586-9702
October 23-26 Anchorage, AK	*Anchorage Assoc. for the Education of Young Children*	
November 17-23	*American Education Week*	
November 9-12 Anchorage, AK	*School Board Assn. Annual Conference*	Carl Rose 586-1083
November 20-23 Dallas, TX	*National Assoc. for the Education of Young Children Annual Meeting*	



$6 Million Deposited to the Alaska Children's Trust

Governor Knowles announced a legislative appropriation of $6 million to the Alaska Children's Trust. The appropriation establishes a beginning foundation for the endowment. The balance of the trust is now at $6,011,360 million. The Alaska Children's Trust is set up as a savings account for children. The principal is never touched -- only the interest income can be spent. Although the trust was created by the State Legislature, it relies on donations from individuals and corporations, along with state and federal funds to build the endowment. The trust is a partnership on behalf of children between the public and private sectors.

The Alaska Children's Trust, reorganized and reactivated through an Executive Order by Governor Knowles, will work through community-driven projects to prevent the cycles of child abuse and neglect and promote positive parenting and healthy families across the state. "It's not just another source of funding for traditional programs -- we intend to be at the cutting edge of preventing child trauma," said Mark Williams, Chairman of the Trustees.

The Alaska Children's Trust Board will meet July 10 from 10am to 4pm at the Bank of America building, 550 W. 7th Avenue, Suite 240, Anchorage. The ACT meetings are open to the public. For more information about the trust, call toll free: 1-800-643-KIDS.

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Children

Alaska Head Start State Collaboration Project
Alaska Department of Community and Regional Affairs
P.O. Box 112100
Juneau, Alaska 99811-2100

Sunshine from Darkness, *continued*

families: These services include: shelter, counseling, medical referrals, social services, public assistance referrals and mental health services. Services are also provided to children who are witnesses to family violence/assault or who are direct victims of violence and assault. During FY 95, 12,495 clients received services through this program. Of that total, 2,915 were minor children.

Other Service Providers. It would be a disservice not to acknowledge the important work of other organizations throughout the state that provide health care services for children and families. A wide variety of health care services, including mental health services are provided by Alaska Native non-profit organizations. These organizations contract to provide state-mandated or state-supported services within their regional or village boundaries. Native non-profit organizations may also receive direct federal funds to provide services. A central issue facing all state supported programs is developing strong partnerships with Native organizations so that more coordinated, comprehensive services are available to children and families.

There are also numerous non-profit organizations who work very hard to see that the needs of children and families are being met. Groups such as: P.A.R.E.N.T.S. Inc., Alaska's statewide parent resource center, sponsor a statewide biennial conference for families of children with disabilities and the professionals who serve them. The Stone Soup Group represents 12 public and private organizations and helps families by determining children's conditions and needs, linking families and service providers and sources of financial aid. They were also responsible for bringing a developmental disabilities pediatrician to Alaska. The Alaska Head Start Association is a statewide organization of parents, directors, staff and community members who sponsor a statewide conference and meet regularly to access programs and services for children and families.

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Alaska Head Start State Collaboration Project

Alaska Department of Community and Regional Affairs • Quarterly Report • Fall 1996

PS 026091

Alaska's Children

Alaska's Budget Process
Pilot or Passenger

In January of each year, the Governor of Alaska formally introduces his budget plan to the Alaska Legislature through his State of the Budget Address before a joint session of the Senate and House. Prior to the speech, he will have submitted the administration's formal budget documents to the legislature. The budget then goes through a complicated review and hearing process before both House and Senate committees and subcommittees. By the end of the legislative session in May, a budget bill will have been passed that becomes the state's spending plan for the coming fiscal year. This

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The Alaska Head Start State Collaboration Project is funded by a grant from the U.S. Department of Health and Human Services.
For more information, contact the Alaska Head Start Office at (907) 465-4860.
Project Director–Marilyn Webb; Newsletter Editor–Dorothy Douglas

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Budget Process, *continued*

budget will have gone through many changes and, depending on the priorities of legislators, may or may not include many of the Governor's budget priorities.

Preparing, reviewing and passing a budget is a huge task for both the Governor and the legislature, and one that many Alaskans may have little interest in, or do not understand. Yet the budget process is one of the most important vehicles for providing future direction for the state, ensuring that the needs of all Alaska residents are met and setting limits on spending so that expenses do not exceed revenues.

Take the liberty of considering the state's budget as a vehicle for getting necessary services and programs to the people. As passengers in this vehicle, it is important to know how much the vehicle costs to build, what are the needs of all the passengers, who or what is piloting the vehicle, and toward what destination the vehicle is moving.

FY 1996 BUDGET

UNRESTRICTED REVENUES	
General Funds state money only, including the Capital Projects budget.	**$2,483.2 billion**
Permanent Fund individual dividends, costs to administer fund, inflation-proofing	**1,412.9 billion**
Loan Fund cost for administering the state's various loan funds (student, agriculture, energy, etc.)	**5.8 million**
Specific Purpose Funds accounts set up for special purposes such as Alaska Marine Highway ferry maintenance	**100.4 million**
Subtotal for Unrestricted Revenues	**$4,002.3 billion**
RESTRICTED USE REVENUES *(use is restricted to specific purposes by law, grant agreements or other limitations)*	
Federal Funds money from the federal government that must be used for specific programs/ services such as highways, Education	**$1,091.7 billion**
Trust and Retirement Accounts money held in trust for certain groups such as retirement/pension, Children's Trust	**32.5 million**
University Receipts student fees/tuition, other income received by U of A, to be used only for University programs	**145.8 million**
Special Revenue Funds income from specific sources like fishing licenses airport fees which can only be used by those programs	**303.8 million**
Subtotal Restricted Funds	**$2,067.1 billion**
Total FY 96 State Budget	**$6,069.4 billion**

How Much Does It Cost?

Generally all the average Alaskan knows about the budget are numbers - big numbers! Through the media we hear numbers like a $2.4 billion general fund budget; or a $6 billion budget if federal, Permanent Fund and other revenues are added to the general fund budget; a $110 million capital budget; a $400 million fiscal gap. Most people would never dream about spending $15 to $20 thousand for a vehicle (let alone $2.4 to $6 billion) without knowing what standard equipment it has (tires, radio) or what luxuries (air-conditioning, tape deck).

By December 15, the Governor submits the state's Operating Budget to the legislature. The Operating Budget is a plan for the yearly distribution of state resources (income) to cover the cost of state programs and services. It includes the spending plan for a number of different funds and accounts. In the past, most people have focused on the "General Fund" budget which is currently about $2.4 billion this year. The Legislature actually appropriates a much larger budget with revenues from the federal government, Permanent Fund and other sources. Many of these revenues are designated for specific purposes. The table to the left shows the entire budget for FY 96 (July 1, 1995 through June 30, 1996).

The most public attention and debate has been over the General Fund budget. The General Fund is made up of money that the state collects from various sources - principally from oil revenues (79%). Because oil revenues have begun to decline significantly (from $4 billion in 1979 to about $2 billion in 1996), the state is beginning to work on cutting general fund expenditures, and exploring the possibilities of increasing revenues from other sources such as taxes, user and facilities fees.

The general fund operating budget supports many state programs and services. The table on page 3 shows the general distribution of state general funds and the types of programs/services in each category.

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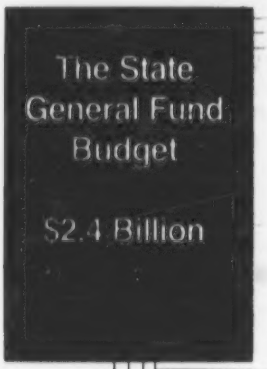
FY96 Alaska State Operating Budget from State General Funds



Local Government Assistance

$61 million

For example: municipal assistance, revenue sharing

Local Schools

$741 million

For example: K-12 *school funding, pupil transportation; Special Ed. Programs*

University System

$167 million

For example: operations expenses, research, tuition/fees

Grants/Formula Programs for Individuals

$349 million

For example: foster care, medicaid, longevity bonus, AFDC

Grants/Formula Progrsm to Non-profits

$128 million

For example: domestic violence shelters, Regional Health Care Corps, Head Start, Child Care R&R's

Capital Projects

$110 million

For example: school construction, water/sewer projects, clocks, roads

Core State Government

$876 million

For example: public safety, prisons, transportation, employee salaries/benefits, fish & game, resource development

The budget of the state represents more than dollars, it represents programs and services that are provided to real people. Future decisions that are made about the budget must be made with the realization that those decisions affect people, the passengers in the budget vehicle.

Who Are the Passengers?

There are around 630,000 residents in Alaska today. All residents in the state have basic needs that the state is responsible, to some degree, for meeting. Every resident should expect to have safe roads, airports and public buildings; water sources that are sanitary and available to everyone; affordable sources of heat and electricity; museums and libraries that are accessible to all residents; communities that are safe and free of violent crime; jobs that pay enough to support families; health care that is not a luxury a resident cannot afford; public workers that are well trained - just to mention a few needs. The state is also constitutionally obligated to provide some services such as public school education to its residents.

The state of Alaska invests an average of $3,753 General Fund dollars in each of its residents - a little less than was invested in 1979 (not including Permanent Fund Dividend payments). Of course, some residents in Alaska require a larger investment of our dollars, and some require less because their needs are different. The state invests more for it's youngest and oldest residents. Children ages 5-18 who are enrolled in public school receive more support than a person who is currently in the workforce. Older Alaskans currently receive a longevity bonus check each month to help supplement their retirement incomes. This program which costs the state about $72 million a year is scheduled to be phased out as one of the state's budget cutting measures. After December 1996, older Alaskans will no longer be able to apply for a longevity bonus. For elderly Alaskans who are unable to live independently, the state has established Pioneer homes which provide different levels of care depending on the person's needs. Costs are subsidized by the state based on the person's ability to pay. Fees for Pioneer Home residents have recently been increased so that the program will eventually become self-supporting.

The state also invests more for residents living in a rural communities than they do for someone living in Valdez. In rural areas, where there are limited employment opportunities, villages and small communities may not have enough community revenues to pay for roads, water/sewer projects, utilities, or classroom public education costs. The state, in these cases, assumes a larger share of the costs of these projects. In more urban areas that do have tax or other revenues, communities are able to assume more of the cost of services and programs, so the state's share is less.

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The state, in partnership with the federal government, also invests money in children and families with very limited incomes so that the problems associated with living in poverty will not have life-long effects on their lives. These investments include pre-natal health care, children's health screenings and treatment for problems, comprehensive preschool programs like Head Start, infant and school nutrition programs, . . .

Budget Process, *continued*

The state's costs also vary according to how well our residents follow the rules. For residents who choose to break laws, the state must pay for their prison time. For each adult in prison, the state's costs are $39,000 a year per person; for each juvenile, the state's costs are $60,000 a year per person.

The state invests in residents who have limited personal resources. Residents who are mentally or physically disabled and are unable to pay for care and treatment can receive state support for health care and rehabilitation. All children with special needs are entitled to a free public school education that provides for their special educational needs. The state, in partnership with the federal government, also invests money in children and families with very limited incomes so that the problems associated with living in poverty will not have life-long effects on their lives. These investments include pre-natal health care, children's health screenings and treatment for problems, comprehensive preschool programs like Head Start, infant and school nutrition programs, job training and adult education programs, child care subsidies to help support parents as they move into the workforce, and family health care clinics and programs.

It is not enough to just consider the needs and costs of today's passengers, we must also look down the road. Traveling down the road, we will be picking up new passengers. Alaska has one of the highest birthrates and one of the most mobile populations in the nation. Our population is expected to increase significantly over the next ten years. A large group of our new passengers will be babies that the state will eventually be obligated to provide a free and appropriate education according to their abilities, both physical and mental. The state will need more schools, teachers, computers, buses and supplies. We want it to be a quality education so that when they graduate they can get a good job and live well; or maybe we want them to continue their education at one of our state subsidized University locations.

Some of our new passengers will be young adults who will need good jobs, clean water and who will be using our roads, airports, libraries, state recreation areas, and natural resources such as fish and game.

Another large group of our passengers will have been on this vehicle for a long time and they will be retiring. Some will have worked all their lives, but without a retirement or benefit plan that is adequate enough to pay for their health care needs, housing or long term nursing care as they get older and more dependent.

We must also realize that a growing number of our new and current passengers are going to commit crimes, destroy property, break laws. We will need to pay either up front for prevention programs to reduce this growing number; or pay more later on to arrest, prosecute and keep them in jail.

Some of our new passengers are going to be ill, disabled or so poor that they are unable to provide for even their most basic needs. Since throwing them off the vehicle just because they are new to the state is not an option, we will need to plan on spending more for health care, special education programs, child care and job training/subsidy programs so that they can contribute to Alaska's economic and social well-being.

All these people on the vehicle, are depending on someone, or something, to drive the vehicle in a manner that provides for the health, safety and well-being of all passengers.

What Drives the Vehicle?

In the past, the process used to develop the budget and present it to the people has been principally driven by numbers. Beginning in August state department personnel are asked to prepare budgets for the program or service for which they are responsible. A basic step in this process has been to take a look backwards to see how much money was requested, authorized and spent in prior years, and build a budget for the next year based on prior year's expenditures. This process narrows the state's view to looking backwards and focusing forward one year at a time. Numbers have also been used as a management tool when budget changes are necessary. In past years, program managers have been given instructions by Governors, legislators, or both, to cut every department's budget by 5% or 10% or 15 % (called across the board cuts) as a way of managing their programs. The numbers process is very evident in the budget forms that are submitted by program managers up to directors; who then submit more forms to their commissioners; who

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consolidated their department's forms for submission to the Office of Management and Budget; who consolidates all the forms for the state and submits them to the legislature.

Although our state has been very good about putting large sums of money into savings accounts like the Permanent Fund (currently $16 billion) and Budget Reserve Account (currently $2.4 billion); the size of the general fund budget was usually equal to the size of the general fund income. With the decline in oil revenues over the last few years, General Fund spending has been reduced. However General Fund spending has been more than the state's income resulting in a "Fiscal Gap." At the end of the 1996 legislative session, the Fiscal Gap was approximately $450 million. During the summer, world market prices for oil increased adding more revenues to the General Fund and the Fiscal Gap was narrowed to approximately $100 million.

Recently, the state has been shifting toward a budget process that is driven more by setting priorities - deciding the most important obligations of the state, both statutory and moral - what outcomes we expect to achieve, and how the success or failure of these priorities will be measured. The shift from a year to year budget driven by numbers and budget cuts, to a priority/goal driven budget process is not easy - rather like converting a vehicle from a luxury sedan to a 4-wheel drive station wagon.

The road Alaska has been traveling on has been reasonably smooth the last 20 years. Declining oil revenues, a growing population and increasing cost for providing services and programs, may mean the state will be facing some hard choices in the future. We are already beginning to see problems. Programs, like public radio, that the state has openly supported in the past are now being viewed as luxuries and state financial support is being cut. As passengers in this vehicle, what choices do you want to make for the next 10 years? What if you were the pilot and not the passenger?

The Road Ahead

There are tools available to help repair, maintain and keep the budget safely on the road as the state meets critical issues in the future. Each of these tools should be evaluated for their effectiveness and for the impacts they will have on passengers in the vehicle.

By the year 2006, due to declining oil production, revenues may drop as low as $1.8 billion. Most people agree that *new sources of revenue* must be developed, but there is wide spread disagreement on what those sources should be and when they should be introduced. Some of the sources are also not very pleasant, like taxes. The bi-partisan Long Term Planning Commission recommended the state raise highway motor fuel, marine motor fuel, tobacco and alcohol taxes in Fiscal Year 1997. The increased taxes would have increased state revenues by $105 million. The legislative majority recommended that more budget cuts to the General Fund should be made before increasing taxes. Other taxes have also been suggested such as state sales taxes and personal income taxes (personal income taxes were eliminated in Alaska in 1980). Alaska is the only state with neither personal income or state sales taxes. Increasing or re-introducing taxes will have personal financial impacts on each Alaskan resident since a portion of their personal income could be diverted into tax payments. Each resident must consider at what point in the next ten years more costs of providing state programs and services will be shifted to citizens.

There are other sources of revenue to be considered. Alaska's additional natural resources such as tourism, timber, minerals, and fisheries are already a source of employment for many residents. By increasing our production and marketing of these natural resources, more jobs could be made available. Consideration must be given to world wide markets for our products. World prices for resources such as gold, timber, and salmon change. If prices do not pay for the cost of production, or if the supply exceeds the demand for a product, companies may discontinue production. Consideration must also be given to the environmental impacts that can occur as a result of marketing our natural resources. Impacts to communities also occur. Alaskan tourism, for example, has grown steadily and communities must provide the infrastructure to support that industry such as docks, public facilities, recreation opportunities and transportation. Not all residents welcome this growth or the changes and that it brings to their communities. While these markets could provide employment for residents, under our current tax system, they would not increase state revenues. Currently, only the fishing and oil industry share a portion of their revenues with the state; minerals development, timber, tourism do not. Increasing state revenues from new natural resource development may also mean shifting state operating costs to new businesses through a new tax base.

Another tool to use is to continue with operating *budget cuts*. Last year, the Governor proposed cutting $100 million from the operating budget over the next three years and the majority legislature proposed cutting $250 million over the next five years. In 1996, $77 million was cut from the budget. Budget cuts come with impacts to programs/services, individuals, communities and federal funding in some cases. When state financial support is reduced, jobs and services will be eliminated. Communities will have to assume more financial responsibility for things like construction and maintenance of school facilities, and in turn increase property taxes or loan financing. Some federal funds require that states match the amount of funding they receive. If the state cuts their share of revenues for programs like Medicaid, then the federal share is also reduced. Some federal programs require a 50% match so that if the state cuts back $1.00, then the federal funds are also cut back $1.00.

Another option, considered radical and very unpopular by some, is to decrease the Permanent Fund Dividend (PFD) program. The PFD was created in 1980 to ensure that each Alaskan resident would have a personal share of the income from the state's oil resources. In 1995, each person who had been in the state one year received a check for $980.00 from the PFD savings account. If state oil resources and revenues dry up, should that also mean that the PFD program will be phased out?

By taking another look at the table on page 2showing the distribution of general fund money today, each resident must decided how much the budget can be cut and how long this tool will be useful for managing our finances.

At the same time we are considering budget cuts, we must also consider if we are going to *allow additions* to our budget in the future. We have already discussed the need to provide core programs and services for an

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COLLABORATION B•R•I•E•F•I•N•G•S

Alaska Head Start Collaboration Grant—Fourth Year Report

One year ago we reported on the work we accomplished during the first half of our five-year Head Start Collaboration Grant, and outlined our priorities for the next 2 1/2 years. Those priorities included: working toward a **comprehensive state plan** for children, **supporting Head Start programs** and **extending Head Start models** into other areas; developing **quality education programs**, continuing the **flow of information** about Head Start and children's issues; and using resources available through the Collaboration Grant to plan for a **statewide forum and report on Alaska's children and families**. Following is our report on the accomplishments in these priority areas during the fourth year of the Alaska Head Start Collaboration Grant.

A State Plan for Children and Families

This summer, Alaska was selected as one of three states to participate in the Danforth Foundation's Policymakers' Program. The program provides specific technical assistance to help state's develop a statewide action plan for delivering services to children. Marilyn Webb, Project director for the Collaboration Grant participated directly in developing the grant application for the program and attended the week long intensive work session in St. Louis, Missouri along with 23 other team members for Alaska. During the next year, the team will continue work on implementing the action plan developed during the week.

A state plan for children includes many pieces. During the last year, two important collaborative pieces were added to the structure that will improve the delivery of services to children and families. In 1996, a Memorandum of Agreement was signed between the Alaska Department of Community and Regional Affairs Head Start Programs; Department of Health and Social Services Special Supplemental Nutrition Program for Women, Infants and Children (WIC); Department of Education Child and Adult Care Food Program/Nutrition Education and Training program; the Alaska Head Start Association; and the Alaska Association of WIC Coordinators. This document establishes a collaborative relationship for providing nutrition services to Head Start children and families. The primary emphasis of the Agreement is to remove barriers to service, reduce duplication, increase effectiveness and efficient use of resources, and to improve service methods so children and families have access to necessary support.

A second Memorandum of Agreement relating to services for children with disabilities was signed between the Department of Community and Regional Affairs Head Start, Department of Health and Social Services Infant Learning Program and Public Health Nursing programs; and the Department of Education Special Education Programs for children with disabilities. The agreement describes the responsibilities of each agency and provides guidance for collaboration and cooperation between programs at the local level to: identify and provide services to children and their families; facilitate transitions for children between programs; provide support to parents; provide personnel training; and develop data collection mechanisms.

Because of the resources available through the Collaboration grant, Head Start Staff were able to participate in several other pieces of a comprehensive state plan for children including: exploring opportunities with AmeriCorp, state child care programs, and the job training program for implementing state and federal welfare reform initiatives so that children and families are not adversely affected; providing technical and in-kind support to the Alaska Children's Cabinet staff; and beginning work on community planning efforts for services to children.

Support for Head Start Programs and Promotion of Head Start Models of Service

The Collaboration Grant supported our efforts to secure and keep state funding for our 13 Head Start Grantees at a time when major budget cuts are affecting many state programs and services. Funding from the Grant also supported the Alaska Head Start Association through training and technical assistance, teleconferencing for Association members and officers, and support for the Association's semi-annual meetings.

Alaska continues to explore new collaborative efforts that will enhance our state's Head Start programs. We have been working with Head Start Region X and XI on developing an Alaska plan for state and federal coordination. We also continue to meet with personnel from the other states that are participating in the Head Start Collaboration Grant program.

Our efforts to promote Head Start model programs into other arenas continues through further development of the Alaska Head Start Dental Health Project and the Family Wellness Project. Head Start continues to participate in the state's Oral Health working group. Two pilot projects for the Head Start Family Wellness program were completed this year. Family Wellness staff worked intensively with victims of a devastating wildfire in Alaska this spring, extending the concepts and training gained from the project not only to Head Start families, but all members of the community. The Chugiak Children's Services Head Start program intends to expand their Family Wellness project during the next year to continuing helping fire victims through the long term disaster recovery process.

Developing Quality Education Programs

The Collaboration Grant directly supported our efforts this year to begin two new and vital projects: Alaska Partners for Quality Early Care and Education and the Head Start Transition Project. The mission of Alaska Partners project is to create comprehensive statewide career development options that are accessible for all who provide care and education for young children in the State of Alaska. The long term goal of the project is to establish a state-wide plan for improving quality care and education that would include: increasing public awareness and support for high quality, cost-effective, coordinated training; developing standards (including quality licensing standards) and professional and workforce development for practitioners in early care and education; advocate for legislation supporting quality care and education; and supporting initiatives for equitable compensation for those who work with young children from birth through elementary school. This project assumes even greater importance as the state is faced

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with increasing demands for child care due to welfare and job reform legislation. As demand increases, quality must be assured. We are in the process of applying for supplemental funds through a mini-grant with $50,000 to provide the staff work and the dollars to support training and mini-grants to move this project forward.

Transition project activities include developing a model plan for transitioning children and families from Head Start into public school settings, promoting that model for all children and families in Alaska, and developing a handbook for all families to use as a guide to help their children make a successful transition into elementary school. Both of these projects are moving beyond the planning and development phase, into the real work stage. During the next year we intend to have real products to begin implementing. Partners in this project are Head Start, public school, PTA, State School Board and Department of Education.

Continued Information Flow about Head Start and Children's Issues

Occasionally, our calendar seems saturated with committee meetings, work sessions, teleconferences and hearings that the Collaboration Grant staff attends. They are, however, an important tool for sharing information about programs and issues that affect children and families. This year Head Start was again represented at a wide variety of gatherings including: The Alaska Interdepartmental Committee on Young Children, the National Maternal Child Health meetings, Collaboration Networking meetings in Washington, D.C., The National Indian Head Start Directors meeting, early childhood education state conferences, Alaska State School Board meetings, Oral Health Working Group, Child Health Plan Working Group, Food Co-alition meetings, the early childhood initiative with the Children's Cabinet.

The Collaboration Grant directly supported the development and distribution of the *Alaska's Children Newsletter* which has again expanded both in the number of copies printed and distributed, and in the information it contains. A new section, "Children's Cabinet News", was added to provide information about the on-going activities on the Governor's Children's Cabinet. As in other years, the four issues published during our fourth year included feature articles about critical issues for children and families. These articles were: "Sunshine from Darkness" - mental health issues, programs and services in Alaska; "Putting Parents and Families in Their Place" - family/school/community partnerships; "Building Communities for Children and Families"; and "Pilot or Passenger" - the state's budget process and responsibilities.

Statewide Children's Forum and Report on Alaska's Children and Families

Long- range planning efforts for children and families is one of the Governor's top priorities. This fall Governor Knowles presented his first State of the Child address to the Alaskan people (see article in this newsletter). One planning effort that the Governor noted in his speech was the plan to collect data on the current status of children, and based on that data establish benchmarks that will serve as goals the state must strive for in order to improve the lives of children and families. The first set of data and benchmarks will be published in the "Report on the Status of Alaska' Children" and distributed throughout the state this fall. Collaboration Grant staff participated in the process to create the report with the Children's Cabinet, Governor's staff, and the state's Anne E. Casey KIDS COUNT project. The report card will be published each year and our involvement in this vital project will continue.

A second planning effort of the Governor is a statewide forum for children, the Alaska Education Summit will bring together teams of people from Alaska's 52 school districts that include local government leaders, school officials, teachers, parents and local business representatives. Marilyn Webb, will be attending the Summit both as a representative the State School Board and the early childhood/Head Start community.

As we enter the last year of our Alaska Head Start Collaboration Grant, our efforts will continue in these five priority areas.

Tanana Chiefs Conference, Head Start, Nulato, Alaska. Program Reviewers Don Wyatt and Brent Cappell with Head Start staff and children.

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Children's Cabinet News

The State of the Child

Last September, as a celebration of the beginning of another school year for Alaska's children and families, Governor Knowles met with a large group of people to talk about the way Alaska's family raises its children. In that speech, Governor Knowles made a commitment to the Alaskan people to report back to them regularly on the progress the state is making for Alaska's children and families; and to go before the Alaskan people each year with an annual "State of the Child" report.

On September 12, 1996, Governor Tony Knowles gave the first State of the Child Address. The address was delivered before an audience in Anchorage and telecast to all Alaska residents through the University of Alaska's Distance Education Classroom technology. Following are excerpts from the Governor's first "State of the Child Address."

"Tonight, I am initiating a new tradition by discussing a subject about which there is nothing more important: the state of Alaska's children—how they are faring today and steps we can take together to guarantee their future is bright.

First, I want to talk about the priorities which I believe are right for Alaska, that Alaskans support, and why they are the foundation of our children's success. Next I want to share with you a report on Alaska's children and some of the benchmarks we need to monitor."

. . . "My priorities are clear: jobs and a healthy economy; good schools; safe healthy communities; and budget discipline.

My first priority, and the essential building block for Alaska's family, is a growing economy that provides sustainable, quality jobs. This is what puts food on the table, provides security and shelter, and keeps the family together."

. . . "And of course, a growing economy provides the resources necessary for our priority of quality education. As President Kennedy said: 'Our progress as a nation can be no swifter than our progress in education.'

The resources Alaskans are willing to commit to this universal priority are only useful if we have the discipline and the commitment to assume the responsibility for excellence.

Productive working families, providing quality education, can only take place in safe, healthy communities. The right choices from pre-natal health care, stopping kids from being both victims of abuse and neglect and from becoming criminals - are all part of a formula that we know works. We know by experience the alternative means a horrendous cost, both in destroyed lives and hard dollars.

The final priority is budget discipline to live within our means and to close the budget gap. This has special meaning for our kids. We will forfeit their future if we don't fix our finances. That imperative should give us the resolve to adopt a long-range financial plan that closes the budget gap, invests in our kids and protects our savings.

Government at all levels can, and is doing, many things. But government is no replacement for families. All of us - every Alaskan - must help share the obligation to ready our children for the future. Families must nurture children - their own and others - so Alaska's children are loved and properly raised.

Employers are obligated to create opportunities for Alaskan families - here in Alaska. Increasingly, they recognize the value of their workers attending teacher conference and other school activities.

Our goal must be children who grow up in a loving family. Whose parents have the opportunity to provide a good breakfast, and a doctor when necessary. Whose homes have clean running water and a flush toilet. Children who already know the dangers of tobacco and other drugs and can distinguish right from wrong. Children whose index fingers are as quick with a computer mouse as a trigger on a video game.

That task is not an easy one. Part of my purpose here tonight is to identify some of the areas where we need to work together to make improvements on behalf of Alaska's children. They're called benchmarks - standards by which we can measure our progress.

Shortly after taking office, I formed a Children's Cabinet, which is about to publish its first "Report on the Status of Alaska's Children." In the next few weeks, it will be sent home from school with your children.

Unfortunately, not everything in the report is good news. Consider just a few statistics:

- Alaska has the shameful distinction of leading the nation in child abuse and neglect, according to the Child Welfare League of American.
- More than a quarter of our 2-year olds aren't fully immunized against disease.
- Twenty percent of rural Alaska households lack adequate sanitation.
- Nearly half of Alaska high school students have used marijuana and a quarter have tried inhalants.
- Smoking among Alaskan teen-agers is well above the national average.
- Nearly a quarter of our fourth graders need significant help in basic reading skills.

. . . "Despite some deficiencies, I'm happy to report many signs of progress. Some are initiatives of my administration; others are efforts underway in communities all across Alaska.

The first step is prevention - stopping crime and other trouble before it starts. We're doing exactly that in many areas, like child abuse and neglect.

We've energized the Alaska Children's Trust to fund community programs that help prevent the horrible incidence of child abuse and neglect. Created eight years ago, the trust never received a dime - until this year.

Thanks to bipartisan work by the Legislature and the administration, the Children's Trust received its first-ever deposit - $6 million. Interest from the trust will be invested in innovative programs that help children and families. The trust believes, like I do, that everybody deserves

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to be a child once.

Preventing crime is not only the right thing to do, it also saves money. Consider that it costs Alaskans $60,000 a year to keep a juvenile offender behind bars and $39,000 a year to jail an adult criminal. Compared to those price tags, prevention programs are a bargain."

. . . "Our schools must prepare students for future jobs, good citizenship and expanded personal horizons. To help achieve this, next month we're launching an important partnership with Alaska's business community and its educators. It's the first Alaska Education Summit, which I'm hosting with ARCO Alaska President Ken Thompson and State Education Commissioner Shirley Holloway."

. . . "Tonight, I want to issue a five-point challenge to all Alaskans - individually and as a family.

- First, all Alaska children should have access to basic health care. This includes protecting the health of rural Alaska Children by making sure every household has adequate sanitation.
- Second, we should lead the nation in reducing what is now the highest level of child abuse and neglect in the country. We know we must do better.
- Third, we must reduce the level of juvenile crime, especially violent crime.
- Fourth, we should insure that by the fourth grade, all Alaska children can read on their own.
- Finally, we must add to the three Rs as a fourth basic skill - computer literacy - so our children start down the right path toward jobs of the future.

The success of this five-point challenge, this call to action, is based upon a faith that we have commonly held values. That every child counts. That all Alaska's children have a right to live up to the potential of their God-given abilities. That all of us have a purpose for being here and that individually and together we can make a difference.

We know these truths in our heart and by our experience. As we put aside petty partisan differences for a higher common purpose, let us in the best traditions of democracy, compete for the best ideas and the best results."

a complete copy of the Governor's "State of the Child Address" and a copy of the "Report on the Status of Alaska's Children" can be obtained by calling toll free 1-800-643-KIDS.

STATUS REPORT

Alaska's Children

What It Takes To Raise a Child

To raise a child to age 18:

- single-parent households with incomes of less than $33,700 will spend $101,580
- two-parent households with incomes of less than $33,700 will spend $106,890
- two-parent households with incomes of $33,700 to $56,700 will spend $145,320

source: Expenditures on Children by Families, 1995 Annual Report. USDA, Center for Nutrition Policy and Promotion

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To be eligible for participation in Head Start Programs, family income cannot exceed:

- $12,940 for a family unit of 2
- $16,220 for a family unit of 3
- $19,500 for a family unit of 4
- $22,780 for a family unit of 5

During FY 96 Alaska Head Start programs served 3,228 eligible children, 8,036 eligible children remain unserved.

source: Alaska Head Start Program

Nationally 15.7 million, almost 1/4, of our American children live in the starkest poverty

Children living in poverty have significantly higher rates of emotional and behavioral difficulties, school drop outs, teenage pregnancy, drug abuse, juvenile delinquency, physical and sexual abuse, significant health problems and death.

ssource: Washington Post National Weekly book review of Keeping Women and Children Last by Ruth Sidel. August/September, 1996

It is better to grow healthy children than to repair adults.

source: anonymous bumper sticker

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The Budget Process, *continued*

increased population base and the changing needs of our existing populations. There are other costs that must also be considered.

When the legislature considers passing a new bill each session, they must also consider the cost of implementing that bill. Fiscal notes are required to be attached to each bill that estimates how much it will cost to pay for the legislation. For example, a bill that increases the time a person will be in jail for stealing a car will cost the state an additional $39,000 per year/per criminal. The state has also put off major repairs and maintenance for state facilities, including public school buildings, and equipment. We now have "deferred maintenance" projects for aging property that must be financed very soon. Advances in industrial technology, telecommunications, computer operations, etc., will require an up-front investment for equipment and training if we wish to keep Alaska moving along with the rest of the nation.

Many of the problems Alaska will be facing in the future are preventable. Problems like alcohol/drug abuse, child abuse/neglect, school dropout rates, poverty, poor health outcomes for babies, or soaring crime rates can be prevented. In the end, it is less costly to invest in prevention efforts than it is to pay for fixing problems after they occur. Prevention programs, however, require a significant up-front investment that may not be measurable for years. ***At the same time we are investing in prevention, we must continue to pay for treatment of problems that have already occurred.*** Consider one of the states most heart-breaking and 100% preventable problems, Fetal Alcohol Syndrome and Fetal Alcohol Effects (FAS/FAE). Babies that are exposed to alcohol before birth are at risk of birth defects that affect their physical, mental and emotional well-being. FAS/FAE children can have serious to moderate health problems, learning disabilities and physical handicaps. Alaska leads the nation in FAS/FAE births. The human tragedy that results from FAS/FAE cannot be measured, but the cost of treating this disease can. Special education programs, health care, long-term care and assistance with job training, employment and housing as these children reach adulthood are certainly measurable and costly investments.

As we consider our current and future sources of revenues, budget cuts, and future additions to our budget, we must also begin to *establish the state's priorities* for its program and services. What are the state's most critical obligations, the least critical, or those obligations that can be shifted to communities and the private sector with the least impacts? What obligations can be eliminated over time? There are many passengers with personal needs that the state plays a major role in meeting and establishing the state's priorities can be a difficult process. Parents with young children may list education as their most critical obligation, an unemployed logger may believe resource development is the highest priority, a rural village resident may feel a clean source of running water for their family has been too long in coming. Families that live in poverty may be concerned with providing a nutritious meal tomorrow or getting their child needed dental care.

In addition to the priorities established by individual residents, we must consider the obligations and priorities of each Department within state government. Departments may be obligated by state and federal laws to provide specific services or to maintain specific programs. Two of the state's largest formula programs, Aid to Families with Dependent Children and Medicaid have been the target of heated debates both at the state and national level. Many people believe these two public assistance programs should be eliminated or severely restricted, while other people support more funding with better program management. Many changes to the programs have been made on a federal level that state's must now implement. However, the new regulations still require that a portion of our budget dollars be spent on these programs. State departments also have non-statutory obligations that contribute to the economic and social well-being of Alaskan residents. The programs and services for each Department must be carefully considered for their individual

FY 97 Children's Specialty Clinics

Site	On-Site Contact	Clinic Date(s)
CARDIAC		
Barrow	Mary Messner 852-0270	7/11-12/96
Bethel	Janet Strom 543-6530	10/8-9/96
Nome	Terry Romanesko 443-3221	4/23/97
Kotzebue	Jean Rabern 442-7152	4/24/97
Bethel	Janet Strom 543-6530	April/May 97
Ketchikan	Patty Sherman 225-4350	5/19/97
Juneau	Meta Lexon 465-3353	5/20/97
Sitka	Georgina Kitka 966-8483	5/21/97
CLEFT LIP AND PALATE		
Fairbanks	Linette Torres 452-1776	7/10/96
Fairbanks	"	10/9/96
Anchorage	Sharon Bezek 269-3400	11/1/96
Anchorage	"	12/13/96
Fairbanks	Linette Torres 452-1776	1/8/97
Anchorage	Sharon Bezek 269-3400	1/10/97
Bethel	Janet Strom 543-6530	Feb/Mar 97
Juneau	Meta Lexon 465-3353	3/28/97
Fairbanks	Linette Torres 452-1776	4/4/97
Anchorage	Sharon Bezek 269-3400	4/18/97
Anchorage		5/16/97
NEURODEVELOPMENTAL		
Ketchikan	Patty Sherman 225-4350	10/29-30/96
Juneau	Meta Lexon 465-3353	10/31-11/1/96
Fairbanks	Sheree Dohner 452-1776	Nov 97
Fairbanks		Spring 97

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contribution to the state's well-being. For example, the Department of Fish and Game's goal of providing "opportunities for people to use and enjoy Alaska's fish and wildlife resources" may not immediately surface on our top 10 priority list; but it would be irresponsible not to consider the importance of subsistence, commercial and recreational use of fish and game in Alaska.

In 1995, the Office of Management and Budget prepared a budget summary for use by the general public. In this document, "Executive Budget Summary for Fiscal Year 1997" each state department has identified their major goals and strategies, identified key issues for consideration, and presented their department's budget summary information. This budget summary, or next's year's edition (available in December), are useful for helping Alaskan residents understand how specific department obligations fit into the complete process for establishing budget priorities for the state.

And finally, just one more consideration for the road. What kind of plan should the state have for the next ten years? Is it possible to choose just one of the tools mentioned here. Does it make more sense to use a combination of tools, or think of some new ones to try? Should we develop a plan now or wait for a few more years and see what new routes develop naturally?

This month, state employees will once again begin the budget process. The Governor will work with staff to develop a consolidated state budget and establish the administration's priorities. In January, the legislature will begin their review process and vote on their budget priorities. At any point in this entire process, Alaskan residents have an opportunity to provide their input, either through their local elected officials or directly to the administration. As passengers in this vehicle, we can contribute both to the success of the trip and the maintenance of the craft.

information sources: *Executive Budget Summary for Fiscal Year 1997*, prepared by the Office of Management and Budget, December 1995. *State of Alaska Six Year Capital Plan - Fiscal Year 1997-2002*, Office of Management and Budget, March 1996. *Governor's FY 97 Budget Office of the Governor, Court System, Legislature*, prepared by Legislative Finance Division. *Alaska State Legislature Budget Guide: The Swiss Army Knife of Budget Handbooks*, prepared by Legislative Finance Division, January 1996. Office of Management and Budget personnel interviews.

Calendar of Events

October	CHILD HEALTH MONTH	
October 3-4 Alyeska, Girdwood	*Alaska State Education Summit*	
October 10-12 Sitka, AK	*Assn. of School Administrator Conference*	Steve McPhetres 586-9702
October 10-12 Anchorage, AK	*State Literacy Association Meeting*	Debbie Manion
October 17-19 Juneau, AK	*National Association for the Education of Young Children- Southeast Alaska*	NAEYC-SEA 907-586-1357
October 20-22 Anchorage, AK	*Elementary & Secondary Principals Conference*	Steve McPhetres 586-9702
October 21-23 Anchorage, AK	*Alaska Head Start Association Fall Meeting*	
October 24-26 Anchorage, AK	*Anchorage Association for the Education of Young Children*	
November 1	*FAMILY LITERACY DAY*	
November 17-23	*American Education Week*	
November 9-12 Anchorage, AK	*School Board Association Annual Conference*	Carl Rose 586-1083
November 20-23 Dallas, TX	*National Assoc. for the Education of Young Children Annual Conference*	
December 6-10 Houston, TX	*National Head Start Association 13th Annual Parent Conference*	NHSA 703-739-0875
January 29-29, 1997 Anchorage, AK	*Early Intervention Conference Maternal Child Health*	
February 22-28 Anchorage, AK	*6th Annual Statewide Special Education Conference*	ASSEC

Children and Adults Genetics and Birth Defects Clinics

Clinic Coordinators:

Anchorage	Christy LeBlond, 269-3430	Juneau	Meta Lexon, 465-3353
Bethel	Janet Strom, 543-6530	Ketchikan	Susan Newburn-Medel, 225-4350
Dillingham	Jean Timmerman 842-5981	Sitka	Nancy Cavanaugh, 747-3255
Fairbanks	Dorothy Stellin, 451-1637		

Anchorage	November 19-20	Anchorage	March 18-19
Fairbanks	November 21	Fairbanks	March 20
Dillingham	November 22		
		Anchorage	April 14-15
Anchorage	January 20-21		
Juneau	January 22	Anchorage	May 20-21
Ketchikan	January 23	Bethel	May 22

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Alaska's
Children

Alaska Head Start State Collaboration Project
Alaska Department of Community and Regional Affairs
P.O. Box 112100
Juneau, Alaska 99811-2100

Head Start Update

Head Start Early Care Program Expands

Seventy-five families with infants will receive home visits from teachers next year through a new Early Care Head Start program. The Fairbanks Native Association's Head Start program received a $650,000 grant that will enable them to serve families with children age birth to 3 years through a comprehensive home-visiting program. Teachers will visit families once a week for a minimum of an hour and a half to provide training for parents in parenting, learning activities for their children, health, nutrition, and other needs identified by the parents. Unlike the FNA's regular Head Start program, which serves only Alaska Native and American Native children, the new program will serve all children from eligible, low-income families.

The new grant will add up to 25 new jobs to FNA by next spring. FNA currently serves 92 children, ages 3-5 in a comprehensive school- based program and 30 children, up to age 3 in a home-based program.

Wake Up and Let's Smell Discipline

by Candida Andrew, staff, Angayuqat Mikelnguut-llu Elitellerkait Head Start Program, Nunapitchuk, AK

Do you ever think about discipline? Disciplining your child or teen? Do you ever sit down and think of how you were disciplined by parents, grandparents, or elders when you were your child's age? Did you ever compare traditional culture disciplining to the modern way now-a-days that some of use - such as time outs, cool off sitting alone in the room, stand in a corner - you name it. I remember being talked to by my parents and by my granpas. Not just because I'm in trouble, but it was like a daily routine for us. Now-a-days, I myself use the modern disciplining with my children. Come to think of it, how will my child learn his mistake by just sitting in his bedroom? Of course, he'll be thinking about it, but not the main conclusions of it. We all need to communicate in order to better ourselves. If we don't know how to start it, gather resources. Elders are the resources and they are always willing to help and give advice. Now-a-days there are parents like myself, who just started to realize how modern we've become and it's affecting our own children. What I mean is our communities are becoming out of the ordinary. Looking back in the years behind, children, teens, and young adults use to be calm, well disciplined, now-a-days we are on our own and want everything done in our own way. What use to be in the old days can't come back just like that, so my advice is, let's all wake up, watch what's happening, listen to what is becoming of us and our communities and better ourselves as "True Native Community People."

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Alaska Head Start State Collaboration Project

Alaska Department of Community and Regional Affairs • Quarterly Report • Winter 1996

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Alaska's Children

Building Communities for Children and Families

In late December, an Alaskan newspaper carried a short news article on a subject that is occurring all to frequently in communities everywhere. The article reported that . . . " About a dozen youths, ages 9 to 15, have been raising havoc in Douglas from the time school gets out until late in the evening." Businesses, homes, a church have been broken into, car windshields have been smashed and tires slashed. The most recent incident, when three public library windows were broken and the parking garage was damaged, brought a new perspective to the problem. Library director, Carol McCabe called a community meeting. She invited parents, youths and community members to brainstorm solutions to destructive youth behavior. "The library is simply setting the table and inviting people," McCabe said. "We're hoping for some community involvement in some really teen-friendly solutions for what's been going on over the past months."

The problem this community is facing is not unusual. What is unusual is the commitment of one key individual to make a difference in her community and the concept that community members should be involved in problem solving - a belief that communities have the responsibility and the ability to solve their own problems.

Individual responsibility and community involvement are two key elements in helping to build strong families.

What Do Families Need?

To become competent caring adults able to contribute to their own well-being and to the well-being of their community, children and families need a range of resources in their lives:

- children need the presence of one caring adult
- parents need jobs that produce adequate income
- families need to live in a community that offers stable, secure housing, decent education and health care, a physically safe environment that fosters play as well as networks of social support and social control among adults and children
- children and families need access to activities, facilities and events beyond home and school through which to build competencies and make connections and contributions to a larger social and civic world
- children and families also need access to services and programs for problems as they develop.

Traditionally, society has depended on families to provide the nurturing environ-

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The Alaska Head Start State Collaboration Project is funded by a grant from the U.S. Department of Health and Human Services.
For more information, contact the Alaska Head Start Office at (907) 465-4860.
Project Director–Marilyn Webb; Newsletter Editor–Dorothy Douglas

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COMMUNITIES, *continued*

ment that enables children to thrive and to enrich their communities with activities and resources that nurture children. The desire of parents to take care of their children has not changed. But today's economic and social stresses make it increasingly difficult for parents alone to provide all that is required for a child's healthy development. Profound changes in the structure and function of families severely strain the families personal resources for caring for their children. Today's families are experiencing:

- high rates of divorce
- significant increases in the number of out-of-wedlock births
- significant increases in the per cent of children who live with one parent
- material, social, and psychological resources available to devote to children are limited, especially for single parents - many more children are living in households in which the sole parent or both parents need to work outside the home - about 63% of children now have mothers in the workforce
- over the last 75 years there has been a dramatic decline in the size of both immediate and extended families resulting in more intense and unrelieved child-raising obligation for nuclear families and a decrease in opportunities for children to experience cross-generational interaction and support.
- as a result of significant geographic mobility, families may be unable to rely on informal social networks in communities - mobility means that families often face periods of isolation while they make new connections, if they are able to make new connections at all.

All families benefit from resources available in their communities. Libraries, schools, sports programs, health care, community celebrations, all increase the capacity of families to provide a healthy environment for their children. At some point in their lives all families, no matter how self-sufficient, need help. Situations such as the birth of a child, family illness or a job change, can create stress and anxiety for families. Families with strong support networks and ample financial resources can usually find the help they need from community resources, neighbors, churches, resource programs, etc. Some families have very complex problems and their ability to cope with problems may be very limited. For example, it is not uncommon for a family with substance abuse issues to also be struggling with child health and keeping their children in school and out of the juvenile court system. If the families ability to cope with their problems is already under stress because of poverty, illness, lack of community and family support networks, then the families struggle becomes even more complicated. In order to resolve their problems, many families will seek help from a system of services for children and families.

Over the years, a very complex system has been developed to resolve problems for families and children that are in crises. For the most part, the services for children and families are planned, funded and delivered by federal and state government programs. Each problem that a family encounters is dealt with by a separate program. There are specific services for specific problems. It is not uncommon for a family to receive assistance from 5 or 6 different caseworkers - one for each separate problem they are experiencing. In the State of Alaska, services for children and families are spread across six departments. Services for families are crises oriented, a family must already be in trouble before they can receive the benefits of a government program. And finally, programs are designed with the idea that one size fits all - program rules and requirements are the same for everyone.

It comes as no surprise that most of our at risk children and families are not getting what they need, that the system of services we have built for children and families is failing, and that more and more families are seeking support and help as their lives become more complicated and stressful.

Today governments, communities and individuals are looking at systems of services for families and children with a critical eye. What they are finding is that we need a shift in focus:

- from crises treatment to prevention - giving support to all children and families so that problems do not occur in the first place;
- from fragmented services to comprehensive services that are understandable and easily accessible for families
- from sole ownership by government to a shared responsibility for children and families with individuals, parents, communities, private businesses, schools
- from national/state program planning and delivery to community-based, family-friendly support programs.

Shifting Our Focus

How much trouble will it be to shift the focus of the services we provide to children and families to comprehensive, preventive programs that provide support to all children and all families, and to plan and provide community-based services that are the shared responsibility of all members of the community? An even bigger question is, will the shift in focus be any more successful than our previous efforts?

The shift in focus is already occurring in some areas and with many programs. But of all of the new focus areas, our communities are probably the most unrecognized and under utilized resource for helping children and families. We have failed to realize that communities have the ability to solve their own problems. Moreover, we have failed to realize a simple truth. . . families and children live in communities. **Because most of a child's life takes place close to home and because families first seek sources of enrichment and support in their own neighborhoods, communities are the place in which planning and providing services can be the most successful for children and families.**

In most communities a variety of services are currently being provided to children and families. These services are often defined as either primary or specialized services. Primary services include such things as toddler play groups, day care programs, education programs, sports teams, art, music, afterschool programs, youth volunteer opportunities, parent support programs and resources of museums, parks, libraries, community centers. Primary services are programs, activities, facilities and events provided by community, state or private organizations that are part of families' familiar social world. They enable children to form friendships and form ties to cultural, religious events and civic traditions. They can enable children to develop and maintain physical vitality, to make and sustain caring relationships, to be resourceful in applying knowledge and skills, and to gain a sense of connection to a larger community. Primary services respond to the developmental challenges children face at different ages, as preschoolers, school-age children, and adolescents and provide benefits that correspond to these stages of development. Primary services also provide support to parents in providing a stable environment for their children. All children and all families benefit from primary services. They give support to all

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children and families so that problems do not occur in the first place.

Many children and families will need specialized services at some point during their lives, some may need them intensively over extended periods. In addition to primary services, specialized services to parents and children are provided in communities. Specialized services are interventions aimed at reducing or resolving problems children or parents may have in physical, cognitive, emotional or behavioral areas. Specialized services may be directed at a child's specific problems such as physical or developmental disabilities, education handicaps, delinquency or alcohol and substance abuse. Some services are directed at children's problems that result from within their family such as parent-child conflicts, neglect, physical or sexual abuse. Some of these services may be required by legislative mandates, such as juvenile justice or child welfare services.

Specialized services are recognized as a critical need for children and families struggling with problems. Primary services are most often thought of as a variety of separate recreational and social activities for children and parents without a real role in child development or family function. They usually exist in communities that have the leadership and financial resources to support them. In most communities, there is little or no connection between the different organizations or government programs that provide services to children and families. Moreover, there is no recognized connection, or planned transition, between primary services and specialized services. The lack of programs and services for children, service fragmentation, disorganization and lack of connections between programs are most clearly seen and felt at the community level.

What are Community-based Services and Programs?

Community has varied meanings. For planning purposes, a community is most commonly defined as a geographic territory in which people live and share a common history, common interests, common institutions and services, and face common problems and opportunities. In small cities, all residents may share these common factors - this is especially true for the small isolated cities and villages in Alaska. In larger cities, the residents in one section of the city may have very different interests, opportunities and problems, than the residents in another section. Communities in larger cities are often defined by neighborhoods or even by ethnic boundaries.

Community-based services and programs are services that are planned and provided according to the needs, interests, resources, goals, and infrastructure of the individual community. Community-based services takes the focus away from specific program or statewide planning and service delivery, and centers it in the community.

Community-based services and programs:

- reflect the culture, language and values of its residents
- are based on the needs and problems of the residents
- build on existing infrastructure and community strengths
- give ownership of problems and solutions to the community
- are tailored to the unique characteristics of the community - in Alaska this is essential because the needs and opportunities are very different in rural isolated communities than the needs and opportunities in an urban community.

Community-based services and programs can span a broad range of planning and service delivery options. Services and programs may be developed for a specific goal such as providing health care for all adolescents in the community; or communities can develop a comprehensive plan that addresses all the interests and needs of its children and families.

One of the best examples of a community-based program is Head Start. The National Head Start Performance Standards require all Head Start programs to use a community development approach when developing local programs. Head Start Program Goals state:

"The Head Start Program is based on the premise that all children share certain needs, and that children of low-income families, in particular, can benefit from a comprehensive developmental program to meet those needs. The Head Start Program is based on the philosophy that:

A child can benefit most from a comprehensive, interdisciplinary program to foster development and remedy problems as expressed in a broad range of services, and that the child's entire family, as well as the community must be involved . . ."

In Alaska, Head Start programs are developed according to the needs, strengths and culture of the community it serves. Community members serve on governing boards for Head Start, volunteer time in classrooms and help to develop programs and services for children. In many rural communities, Head Start facilities have become a focal point for community activities and Head Start services and projects are often duplicated or expanded to include community members outside of the Head Start programs. Alaska Head Start programs reflect the language, culture and values of the community it serves and stands as an excellent model for successful community-based program planning.

How Do Community-based Services and Programs Happen?

Often the desire to change the way a community provides services to its children and families happens because of one or two key individuals, as described in the beginning of this article. One person will decide to look at a specific problem, enlisting the help of other community members and that effort may grow into a comprehensive look at how all children and families are being served by the community. A state or national program may decide to solicit community input before implementing a new service in the community which can spark a long-term comprehensive plan for the community. It is very common for communities to develop on their own a long-term plan for the use of natural resources in their community, such as tourism, timber, oil; but less common for communities to develop a long-term comprehensive plan for children and families.

Changing a community's current system of services is a long-term undertaking. Systems often seem to have a life of their own. Community members interested in developing a community-based system of services must develop a process of change powerful enough to overcome multiple layers of resistance in attitudes, relationships and policies. There is no single right way to make change. Community members must find the most effective way to knit their local needs, resources and preferences into a plan.

The process of change will involve several different stages. One of the most complicated stages is forming the planning and decision making group that will guide the planning efforts. Community-based planning should be a civic process, broadly representative of

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COMMUNITIES, *continued*

youth, parents, organizations, community interests and religious organizations. The group should be informed but not dominated by service providers. Citizens should take an active part and feel ownership in setting their community goals and priorities. The planning and decision making group is complex - who to include, the role and authority of the group and the individuals in the group, the process used to make decisions, the relationship of the group to other governmental bodies, and the commitment of the community and others to the work all need to be considered.

A second stage in the process is to develop community goals for children and families. The goals should reflect the desired outcomes and valued qualities of life for children and families, the opportunities the community wants for their children, guide the planning of services and distribution of resources, and establish targets that services providers can be held accountable for achieving.

Another stage is to develop a plan for providing services to children and families.

To develop a plan, information about the community will need to be collected - often this process is called a needs assessment. Generally, information is collected from parents and children about their interests and needs, and an inventory of all community services (both primary and secondary) and existing resources is taken. This information is used to develop a plan for services and programs that match the needs and interests of the children and families in the community. The plan should focus the attention of services providers on matching their programs to the needs of the community. Service providers should be able to coordinate and integrate what is available in the community and create what is needed. Ideally, all systems of services and programs would be able to fit into the community plan.

One of the most difficult stages in the process is taking action - implementing the plan. It is at this stage that even the best-laid plans can fail because there may be so many obstacles to overcome. Taking action means that community members, families, service providers, government agencies, may have to change their current ways of doing business. Partners must agree to develop and use the technical tools and interagency agreements to put the community plan into action. For government sponsored services and programs, it may mean changing program rules and regulations, funding requirements, confidentially rules, or eligibility requirements just for starters. Many of these things are spelled out in program rules, laws and regulations and are not easily modified. Where one partner or service provider may have had sole authority and responsibility for a program - they now may have to share authority, funding and program responsibility with another provider. Community plans may choose to develop one program over another to better meet the needs of children and families. For example, if a community plan calls for increasing after-school programs for school age children and decreasing community support for pre-school services, providers may have great difficulty in supporting the plan.

A final stage in the process provides for continual evaluation of the community plan and develops strategies to adapt, expand and recreate their plan to fit the changing needs and interests of children and families. It is expected that children and families needs and interests will change over time. Likewise, community plans must be able to grow and change to meet the needs of its community members.

An African proverb states . . "It takes a village to raise a child." This theme is often quoted because it simply states what children and families need: the whole community and all its members, not just a particular program or agency, to share the responsbility for what happens to children and families. Children and families need to live in communities where they are valued, where they are safe and where their needs can be met. Children need strong families and families need strong communities.

Be A Children's Champion

The problems facing young children and their families are complex and sometimes seem overwhelming. For many children at risk, the presence of just one caring adult in their lives has made the difference between failure and success. The adult may be an aunt, uncle, teacher, coach, church leader, neighbor, or community member. One person can make a difference . . . and one child can make a difference your life. Today, more than ever, children need adults to be their champions - someone committed to making the world a more caring place that offers every child and family the opportunity to thrive and to make sure that they get the essentials they need to thrive. **Children need champions.**

Here are five steps that you can take to make a difference for children . . . to **Be a Children's Champion . . .**

Speak out on behalf of children at every opportunity.

You have knowledge and experience about the quality of life for children in your community. Share your information with others - family members, friends, colleagues. Write a letter or call a radio talkshow. Speak to key decisionmakers, the school principal, school board members, business leaders, city council members, state representatives and members of Congress. Demonstrate your concern and caring about young children. Make sure people know that children are a priority in your community.

Do something to improve the life of one child beyond your family.

Volunteer at a local school to tutor a child. Accompany children on a school field trip or help with a school clean-up effort. Take a child from your church or synagogue on a visit to a museum or the zoo. Volunteer at a child care center. Offer your services or expertise, such as special skills you've obtained on your job, to your local school or youth center. There are many opportunities to connect with children beyond your family. Think back to your own childhood. Do you remember one adult who make a difference in your life? Repay the favor by making a difference for another child.

Hold public officials accountable for making children's well-being and learning a national commitment in actions as well as words.

Nationally, we are entering a new era in which the size of our federal government is being reduced, with more decisionmaking turned over to states and communities. Children's Champions must carefully monitor how changes in programs and funding are planned and implemented to ensure that children - who lack a powerful lobby and special interest votes - are not neglected in the decisionmaking. Efforts to support children and families must receive the highest priority. Investing in a child's future today is our guarantee of a strong nation tomorrow.

What can you do? Find out how your public officials stand on issues affecting young children and families. Consider their stands as you select candidates to support. Take steps to

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share information you have about children and early childhood programs with policymakers and their staff. Choose candidates who recognize that supporting families and investing in all our children will reap the greatest rewards for our nation. Make sure that you register and VOTE in local, state and national elections.

Encourage the organizations to which you belong to make a commitment to children and families.

Make a list of all the groups to which you belong. How can they support children and families in your community? Consider these ideas. Encourage your employer or club to "adopt" a school or children's program and purchase equipment or volunteer. Arrange for members of your church or synagogue to clean up or maintain a park or neighborhood play area. Set up a community scholarship program to help families better afford a good early childhood program, sports program or school.

Urge others to become a Children's Champion.

Your voice raised on behalf of children and families is critically important. Your voice joined with many others is even more powerful. Encourage your colleagues, friends, neighbors, and everyone you know to also become a Children's Champion. What could be more important - to our future and our children's future?

- taken from "Be a Children's Champion" - brochure produced by the National Association for the Education of Young Children.

COLLABORATION

B·R·I·E·F·I·N·G·S

Teaching Excellence

Four Alaska teachers were recently recognized for their efforts on behalf of children and families by the National Science Teachers Foundation Program. Each year the NSTF bestows the Presidential Awards for Excellence in Science and Mathematics Teaching on deserving teachers in the nation. Four teachers were chosen from Alaska to receive recognition for their innovative and dedicated work with Alaska's Children. They are:

- **Fred Hiltner**, Harborview Elementary School, Juneau - Elementary Mathematics
- **Cynthia Curran**, Iditirod Elementary School, Wasilla - Elementary Science
- **Kathie Maloney**, Chugiak High School, Eagle River - Secondary Mathematics
- **Nancy Whitmore**, Colony Middle School, Palmer - Secondary Science.

In addition to national recognition, the Presidential Award includes a National Science Foundation grant of $7,500 to the teachers school to be spent under the teachers direction over a period of three years to supplement, not replace, other resources used for improving the school science and mathematics program. The Award also includes a trip to Washington, D. C. for a formal award ceremony with the President and opportunity to exchange ideas and network with other teachers during a series of events planned for teachers across the nation who received the Presidential Award.

Parent and Family Involvement

Because student achievement data and student retention data both show that the involvement of parents and families is critical to student success in school, The Alaska Department of Education is trying to increase the meaningful involvement of parents in their children's education. The Division of Teaching and Learning has established a Parent and Family Involvement Desk for School-Linked Services in the Division. Dee Dee Satran, who has been in charge of Preschool Certification half-time, will expand her work hours and duties to include setting up the Desk.

Some of the anticipated activities of the desk include: a "resource referral" service, possibly through an 800 number for parents; identifying and coordinating the parent involvement components of all federal grants and coordinating the use of federal dollars to assist in this area; providing training in upcoming conferences; publishing a parents assistance section in newsletters; and exploring the resources available in the state and in other states. For more information contact Dee Dee Satran at 907 465-8703.

STATUS REPORT

Compared to the lower 48, Alaska's Children are . . .

	National	AK	Anch./ Mat-su	Gulf	Interior	North	SE	SW
Child Death Rate *(per 1,000 children ages 1-14, 5 year average)*	31	40	35	34	32	103	31	78
Infant Mortality Rate *(deaths before age 1 per 1,000 live births, 5 year average)*	9.1	9.1	8.3	7.2	8.1	16.1	8.4	12.0
Births to Single Teens *(per 1,000 females ages 15-19, 5 year average)*	40.9	41	40	27	33	107	39	56
Percent of Teens who are High School Dropouts *(among all teens ages 16-19)*	10.3	10.6	9.7	12.0	9.3	14.6	14.7	9.9
Percent of Teens not in High School & not in labor force *(among all teens ages 16-19)*	10.0	7.1	5.7	6.6	6.0	12.2	8.8	13.4
Arrest Rate for Violent Crimes by Juveniles *(arrests per 1,000 ages 10-17)*	212.0	219.0	189.0	NA	NA	NA	NA	NA
Teen Violent Death Rate *(per 100,000 teens ages 15-19, 5 year average)*	69.5	125	94	131	121	369	103	288
Percent of Children Living in Poverty *(share of families with incomes below poverty level)*	19.8	10.6	6.8	6.2	10.8	18.9	6.4	23.8
Percent of Families Headed by Single Parents *(share of families with children under 18)*	24.2	21.8	22.2	19.1	19.2	32.7	24.0	21.3

source: Kids Count Alaska Databook, The Anne E. Casey Foundation

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Governor's Conference on Youth and Justice

In November 1995 Governor Tony Knowles appointed the Governor's Conference on Youth and Justice - a broadly based group of concerned Alaskans -- to address the challenges of youth and justice in Alaska. The Conference was established to conduct a comprehensive review of the juvenile code, make recommendations on how to improve the systems in Alaska that serve children and youth, and develop a plan to help prevent youth from entering the justice system.

The Conference began its work with a widely attend forum, open to the public, held in Anchorage in early November. The conference will complete its task in September 1996 with a report and recommendations to the Governor. From now until then, the three Conference work groups will conduct research, examine and evaluate existing programs, and meet frequently via teleconference. Face-to-face meetings of all work groups are also scheduled. All meetings are open to the public.

The three work groups, and the focus of their efforts, are:

Prevention Strategies Work Group

This work group will identify the factors that promote safe, healthy, productive youth and communities. The groups will review and make recommendations for changes in present prevention efforts and devise a plan for comprehensive prevention and early intervention strategies, at the state, community, tribal and family levels, that are designed to prevent destructive behavior. Chair of the work group is Elizabeth Holmes, Executive Director, Anchorage Center for Families.

Children and Youth at Risk Work Group

This work group will focus on problems of children and families at risk of harming self or others, as well as those who have been harmed. Its members will assess and evaluate the problems facing this population and the deficiencies in our current systems' response. The group will identify and recommend effective solutions and assist Alaskan communities in developing culturally appropriate responses to the problems identified population. The Work Group chair is Mark Begich, Assembly Member Municipality of Anchorage.

Juvenile Offenders Work Group.

This work group will make recommendations concerning state and local responses to youths committing criminal offenses. The recommendations will involve: revisions to the children's code based on a balanced restorative justice model which emphasizes public safety, prevention, intervention, and accountability; partnerships among parents, schools, business people, law enforcement, and community leaders in urban, rural, and Bush Alaska; and fiscal responsibility. The work group chair is Susan Humphrey-Barnett, Director of Mental Health Services, Providence Hospital.

All three of the work groups will use available data, information from government agencies, information from private organizations, and identify areas where information is missing or may be inaccurate. They will solicit and consider public comment and develop recommendations and prevention plans, taking into account the state's current fiscal situation, and will evaluate the fiscal impact of its recommendations and plan.

Proposed Milestones for the work groups are:

- Develop scope of work - finalize by December 1995 Work Group teleconference
- Gather the facts - data compilation should be completed by agency staff supporting work groups by February
- Investigate options to address issues
- Preliminary recommendations in writing to be distributed to each of the 60 people assigned to the three work groups for comments
- Written draft recommendations submitted to entire group; public comment solicited - July 1996
- Final written reports to Executive Committee - August 1996, all Conference session

A listing of work group members and scheduled teleconferences and meetings are available. For more information on the work groups or conference activities, contact Donna Schultz, Interim Project Director, at 907-465-3458.

Head Start Update

Seamless Systems

The Infant Learning Program (Department of Health and Social Services), the Special Education Services (Department of Education), and the Alaska Head Start Program (Department of Community and Regional Affairs) are working together to address the issue of transition for children and their families into and out of these programs. These programs hope to provide community based workshops for communities who want to provide a "seamless system of services" for children and families. Participants in these workshops would include Special Education teachers, Head Start teachers, private preschool teachers, Infant Learning Program teachers, families and other interested early childhood providers.

In order to focus on training issues that are relevant to particular communities, a statewide survey of early childhood providers is being conducted. The survey will allow workshops to be tailored to the specific transition needs and concerns of each community or region.

For more information on the survey or development of the transition workshops contact Pam Muth, DHSS Infant Learning Program at 274-2542.

Recognition for Quality Work

Prevention Associates was recently awarded the Alaska Public Health Association's (APHA) Community Service Award for 1995. The Award was presented at the 1995 Alaska Health Summit held in November. Prevention Associates, a health and human services organization, was founded by Sally Mead in 1992. The APHA voted to recognize Prevention Associates *"for its work in the area of child and family health and for its commitment to enhancing the ability of Alaska's families to improve the quality of life for their children."*

Prevention Associates is specifically cited for the work on the Alaska Head Start Health Improvement Initiative in the areas of oral health and mental health. Prevention Association has developed and managed a

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project to improve the dental health status of preschool children, and to advocate for improved dental care for children. The Family Wellness Project which seeks to promote positive Mental Health for preschoolers and their families is receiving high praises from the participants. Prevention Associates' work has been characterized by a high degree of involvement and participation of families and parents, the communities, and the other services providers."

Prevention Associates strives for a collaborative and culturally competent approach in working with existing health, education and human services systems. They provide planning, systems development, training and technical assistance, and project management services. Prevention Associates currently manages a Tobacco Initiative Project for the Indian Health Service as well as the Dental Health project and Family Wellness project . Working closely with the Alaska Department of Health and Human Services, Division of Maternal Child and Family Health, Prevention Associates supported the creation of an Oral Health Working Group within the Department. Prevention Associates is also the training and technical assistance provider for all Head Start grantees in Alaska.

Calendar of Events

January 9 Juneau	*Alaska Interdepartmental Committee for Young Children Quarterly Meeting*	Marilyn Webb 907 465-4861
January 22-26 Anchorage	*Alaska Head Start Regional Training*	Bonnie Kittredge 907-48-2042
February 5-9 Juneau, AK	*Alaska Head Start Association and Head Start Directors Meeting*	
March 7-10 Idaho	*Region X Head Start Association Meeting*	
February 6-8 Juneau	*Governor's Council on Disabilities and Special Education*	David Maltman 907 563-5355
February 7-9 Anchorage	*22nd Annual Bilingual Multicultural Education Equity Conference*	Anne Kessler 907 465-8716
February 1996 Juneau	*Alaska Childrens Summit*	Marilyn Webb 907-465-4861
March	*National Nutrition Month*	
April 14-16 Anchorage	*1996 Alaska Children's Mental Health Conference*	Gina Macdonald 907 561-4247
June 3-7 Anchorage	*Alaska Head Start Association and Director Meeting*	

Children's Cabinet News

The Governor and Children's Cabinet are currently concentrating on four initiatives:

- Activate the Alaska Children's Trust
- Initiate Systems Change to Focus on Prevention
- Elevate the Importance of Children - Reporting on the Status of Children
- The Conference on Youth and Justice.

The Children's Trust

The Children's Trust was established in 1988 by the Alaska Legislature to promote community-based initiatives that strengthen families and children. However, the trust has never been funded. Working to get corporate donations, contributions from Alaska citizens and special funds from the federal and state governments, the Governor, Children's Cabinet and supporters intend to permanently establish the Trust. The income from this savings account for children will fund projects designed to support families and communities to prevent cycles of neglect, abuse, exploitation, delinquency -- providing a firm foundation for children to grow up happy and healthy.

Initiate Systems Change to focus on Prevention

State government is inundated with reports that highlight the tremendous needs of children in our Alaskan communities. These complex needs challenge our State service systems to change. The Children's Cabinet is moving to critically evaluate the current way we deliver services. The Cabinet intends to support new designs for prevention initiatives which get children help before their health and happiness is compromised. Some of the work includes:

- Eliminating barriers to services (regulations, procedures and policies) -- to get rid of the red tape that threatens to hold our children hostage;
- Evaluating current programs and services to determine gaps and overlaps, then correcting the problems;
- Conducting a legislative review so that all legislation impacting children is challenged to deliver what is best for children.

The Cabinet has appointed an Interdepartmental Technical Assistance Team to assist with this important work.

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Children

Alaska Head Start State Collaboration Project
Alaska Department of Community and Regional Affairs
P.O. Box 112100
Juneau, Alaska 99811-2100

Drawing Attention to the Status of Children

Although children's issues are becoming more predominant with the rise in child abuse and neglect, juvenile delinquency and violence, a united voice including policy-makers, families and communities is silent. Our Governor, with the support of the Children's Cabinet, intends to send a message to the Alaskan community, calling attention to the status of children - calling for individuals, families, communities and policy-makers to do what's best for children. The plan includes:

- An annual "State of the Child" address by our Governor to the legislature and citizens.
- A "Children's Report Card" distributed to the Alaskan community to tell how well we all are doing on behalf of children.
- A broad-based public awareness campaign to highlight children's issues statewide. The Cabinet intends to keep children in the fore-front of the Alaskan public.

The Governor's Conference on Youth and Justice

The Governor is convening this event to concentrate on two things:

- to give policy-makers a snapshot of what's happening with youth and justice issues in Alaska;
- to make recommendations supporting positive change.

The conference pulled together national experts, specialists from state and local governments, parents, teens, students and elected leaders to talk and problem-solve our youth and justice issues. The conference focused on three themes: dealing with juvenile offenders; reviewing the criminal code by which they're prosecuted; addressing the needs of at-risk youth; and finally, developing prevention strategies that give children every opportunity to grow into capable, productive adults. The conference began it's work with the public forum, but will continue it's efforts throughout the next year with a report and recommendations to the Governor in September 1996. Further details on the continuing work of the conference is available in a separate report of the Youth and Justice Conference in this newsletter.

For more information on the activities of the Children's Cabinet, contact Nila Rinehart, Special Staff Assistant at 465-4870.

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